P 49

TRI-SERVICE MEDICAL INFORMATION SYSTEMS (TRIMIS) PCNRTB-RD2

PHARMACY CONSOLIDATED FORMULARY SERVICE

FOR

USAF HOSPITAL LITTLE ROCK

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DEPARTMENT OF THE AIR FORCE
USAF Hospital Little Rock (MAC)
Little Rock Air Force Base, Arkansas 72099

PREFACE

This formulary has been compiled and published by Pharmacy Services, USAF Hospital Little Rock, Little Rock Air Force Base, Arkansas. The purpose of this formulary is to provide a guide for hospital staff and civilian physicians who treat active duty military, retired military personnel, and dependents of each.

A new formulary listing will be printed every year with all revisions.

USAF Hospital Little Rock operates under the formulary system. All drugs are procured, and dispensed by generic equivalents when brand names are written by the prescriber. This system allows the Pharmacy and Therapeutic (P&T) Committee to evaluate, appraise, and select from the numerous medicinal agents available while preventing unnecessary duplication of the same drug and its preparations. The P&T Committee seeks a balance between progressive and economic drug therapy. It is desired that standard products be prescribed rather than local purchase items unless the patient cannot tolerate or is refractory to the standard drug.

PHARMACY POLICIES

The pharmacy will fill prescriptions written by military physicians, dentists, physician assistants, and nurse practitioners. The prescription must be written on AF Form 781, "Multiple Item Prescription," for drugs contained in the current formulary, and contain all the required information specified by state and federal laws and AFR 168-4. Special purchases may be requested for active duty patients and patients who seek routine care at this facility. The request must be accompanied by full justification for the use of a drug not in the formulary. The prescriber must justify the use.

The pharmacy will fill prescriptions written by civilian physicians and dentists licensed to practice in Arkansas. The prescriptions must be for drugs contained in the formulary and to patients authorized medical care at Uniformed Services Medical Facilities. The prescription must conform to the requirements of state and federal laws and AFR 168-4. Quantities dispensed and refills authorized will be subject to current local policies and facility capabilities, and be subject to change without notification. The patient's identification (ID) card must accompany the prescription and/or parent's ID card for children under 10 years of age.

Prescriptions will be refilled only if the original prescription was filled at this pharmacy and is contained in the current files.

Prescriptions for controlled drugs from outside the state of Arkansas will not be filled. Copies of prescriptions from other pharmacies will not be filled at this pharmacy, and this pharmacy will not supply copies of prescriptions to other pharmacies. Prescriptions by telephone will not be accepted. Prescriptions for retirees or military dependents are only filled if routinely stocked in the pharmacy.

The pharmacy may mail prescriptions to patients who reside in Arkansas, maintain records at this facility, and cannot come to the pharmacy because of physical handicaps, illness, or unavailability of proper transportation. All mailings will be subject to the limitations imposed by manning and packaging capabilities.

The pharmacy will provide all wards and clinics with those drugs on the authorized list when presented with a properly prepared and signed AF Form 1150. Drugs not on the ward authorized list may be procured from the pharmacy by presenting a properly prepared and signed AF Form 781 for individual patients. The pharmacy will maintain pickup and delivery service subject to manning limitations.

DAVID J. O'MARA, Colonel, USAF, MC
Commander

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SUGGESTED PEDIATRIC DOSAGES

The following list is intended to provide pediatric drug dosages for drugs which may be needed by the medical officer of the day (MOD) or by a general medical officer.

ANTIBIOTICS	ORAL	OTHER
Pen G		50,000 to 300,000 u/kg/day (usually 100,000 u/day IV q 6h)
Bicillin		.3 to 1.2 million u/day single I.M. dose
Pen V.K.	125 or 250 mg q.i.d.	
Ampicillin	50 mg/kg/day given q.i.d. (usually 125 or 250 q.i.d.) (Note: Do not stock suspension)	
Amoxicillin	25 mg/kg/day given t.i.d. (usually 125 t.i.d.)	
Oxacillin	25-50 mg/kg/day divided q 6h (usually 250 mg q.i.d.)	
Cleocin	*CPS	
Ceclor Susp	40 mg/kg/day (usually 125-250 mg t.i.d.)	
Gantrisin	75 mg/kg/day divided q 4-6h (usually 500 mg q.i.d.)	
Erythromycin	30-50mg/kg/day divided q 4-6h	
Stearate Salt	(usually 200 mg q.i.d.)	
UTI ONLY: Mandelamine	100 mg/kg/day P.O. divided q 8h	Maintain urine acidity below pH5
Nitrofurantoin	5-7mg/kg/day P.O. divided q 6h	

ANTIBIOTICS	ORAL	OTHER
ANTIFUNGALS		
Nystatin	Oral drops as on bottle q.i.d topically	
Grifulvin V (Griseofulvin Microcrystalline)	10mg/kg/day P.O. divided q 6-12h	Absorption improved if taken with milk
*CPS - Call Pediatric Service		
ANTI-TB		
Isoniazid	Propnlactic 10mg/kg/day up to 300mg/day single dose	
	Therapeutic - *CPS	
Ethambutol	*CPS	
Pyridoxine	*CPS	
ADRENERGICS		
Ritalin	*CPS	
Epinephrine 1:10,000		.01cc/kg/dose/S.C.
Susphrine 1:200	.005cc/kg/dose S.C. X 1	
Sudafed Syrup	30mg/5cc 1 teaspoonful q.i.d. P.O.	
Alupent Syrup	10mg/5cc 1 teaspoonful q.i.d. P.O.	

ANTIBIOTICS	ORAL	OTHER
ANTI-DIARRHEA PREPS		
Paregoric	*CPS	
Lomotil	*CPS	
DECONGESTANT-ANTITUSSIVE-ANTIHISTAMINE PREPS		
Novahistine	5cc q.i.d.	
LAXATIVE		
Mineral Oil	*CPS	
Milk of Magnesia	5ml/kg/dose	
Dulcolax	.3mg/kg/day P.O.	
SEDATIVES		
Chloral Hydrate	30 mg/kg/dose	
Phenobarbital	5mg/kg/day P.O.	
BRONCHODILATORS FOR ASTHMATICS		
Aminophylline		3-4 mg/kg q 6h I.V.

ANTIBIOTICS	ORAL	OTHER

ANALGESICS

A. Narcotics:

Codeine	5 1mg/kg/dose P.O. or S.C.	
Demerol	*CPS	

B. Non Narcotics and antipyretics:

Tylenol	1 grain/year up to 10 grains, may repeat q 4h	
Aspirin		

ANTICONVULSANTS

Phenobarbital	5mg/kg/day divided b.i.d. or t.i.d.	4 5mg/kg/dose I.M.
Dilantin	5 mg/kg/day given t.i.d.	
Valium	*CPS	(Emergencies: 1 to 10 mg I.V. very slowly until seizures controlled.)

ANTI EMETICS

Tigan		100 200 mgs per suppository q 6-8h

Compazine (All phenothiazines)
[DO NOT USE IN PEDIATRIC AGE GROUP (UNDER 6)]

LIQUID MEASURE

Metric (ml or cc)	Approximate Apothecary Equivalents
1000 ml	1 quart
750 ml	1 1/2 pints
500 ml	1 pint
250 ml	8 fluid ounces
200 ml	7 fluid ounces
100 ml	3 1/2 fluid ounces
50 ml	1 3/4 fluid ounces
30 ml	1 fluid ounce
15 ml	4 fluidrams
10 ml	2 1/2 fluidrams
8 ml	2 fluidrams
5 ml	1 1/4 fluidrams
4 ml	1 fluidram

LIQUID MEASURE

Metric (ml or cc)	Approximate Apothecary Equivalents
3 ml	45 minims
2 ml	30 minims
1 ml	15 minims
0.75 ml	12 minims
0.6 ml	10 minims
0.5 ml	8 minims
0.3 ml	5 minims
0.25 ml	4 minims
0.2 ml	3 minims
0.1 ml	1 1/2 minims
0.06 ml	1 minim
0.05 ml	3/4 minim
0.03 ml	1/2 minim

WEIGHT

Metric	Approximate Apothecary Equivalents
30 Gm	1 ounce
15 Gm	4 drams
10 Gm	2 1/2 drams
7.5 Gm	2 drams
6 Gm	90 grains
5 Gm	75 grains
4 Gm	60 grains (1 dram)
3 Gm	45 grains
2 Gm	30 grains
1.5 Gm	22 grains
1 Gm	15 grains
750 mg	12 grains
600 mg	10 grains
500 mg	7 1/2 grains
400 mg	6 grains
300 mg	5 grains
250 mg	4 grains
200 mg	3 grains
150 mg	2 1/2 grains
120 mg	2 grains
100 mg	1 1/2 grains
75 mg	1 1/4 grains
60 mg	1 grain
50 mg	3/4 grain
40 mg	2/3 grain

WEIGHT

Metric	Approximate Apothecary Equivalents
30 mg	1/2 grain
25 mg	3/8 grain
20 mg	1/3 grain
15 mg	1/4 grain
12 mg	1/5 grain
10 mg	1/6 grain
8 mg	1/8 grain
6 mg	1/10 grain
5 mg	1/12 grain
4 mg	1/15 grain
3 mg	1/20 grain
2 mg	1/30 grain
1.5 mg	1/40 grain
1.2 mg	1/50 grain
1 mg	1/60 grain
800 mcg	1/100 grain
600 mcg	1/120 grain
500 mcg	1/150 grain
400 mcg	1/200 grain
300 mcg	1/250 grain
250 mcg	1/300 grain
200 mcg	1/400 grain
150 mcg	1/500 grain
120 mcg	1/600 grain
100 mcg	

CONTROLLED DRUG SUMMARY

The following list of controlled drugs are stocked in the hospital pharmacy:

Schedule II

Codeine 30 mg tablets
Demerol 50 mg tablets
Demerol inj 50, 75, 100 mg tubexes
Dexedrine 5 mg tablets
Ethyl Alcohol
Innovar Inj
Morphine 10 mg tubex
Nembutal inj
Percocet 5 tablets
Ritalin 10 mg tablets
Ritalin SR 20 mg
Seconal 100 mg capsules
Sublimaze inj
Nubain inj

Schedule II-IV-V

Chloral Hydrate syrup
Clonopin 0.5 mg tablets
Cylert 37.5 mg tablets
Dalmane 30 mg capsules
Darvon 65 mg capsules
ETH and Codeine elixir
Fiorinal tablets
Librium 10 mg capsules
Lomotil tablets
Mebaral 32 mg tablets
Meprobamate 400 mg tablets
Novahistine expectorant
Paregoric
Parepectolin suspension
Penthothal
Phenobarbital elix 20 mg/5 cc, 30 mg tablets, and 130 mg inj
Serax 15 mg capsules
Talwin inj 30 mg/amp and 50 mg tablets
Tylenol No. 3 tablets
Tylenol with Codeine elixir (12.5 mg/5cc codeine)
Valium 5 mg tablets and 10 mg/amp inj

Prescriptions for those drugs listed in Schedule II must be separate from those in Schedules III-V. In no instance can controlled drugs be written on the same form with non controlled drugs. Patient's name, address, phone, and SSAN should be included on each prescription. Patient's age should be on all prescriptions for children under the age 13.

Schedule II drugs cannot be refilled. Schedule III and IV drugs will not be refilled except for seizure medications. Prescriptions are limited to one month supply and a maximum of five refills when allowed and cannot be refilled six months from date of issue.

PRESCRIPTION LIMITATIONS

The following limitations currently exist on all prescriptions:

1. Antibiotic prescriptions will not be refilled unless a chronic condition is specified, e.g., acne.

2. Cimetadine and sucralfate prescriptions will be limited to one month supply and one refill. Maintenance doses of 1-2 daily refillable up to five times.

3. Muscle relaxants, e.g., norgesic forte, robaxin, parafon forte, will be limited to 10 day supply and one refill. Flexeril is limited to a 5 day supply and one refill.

4. Schedule III, IV, and V drugs are limited to one month supply and no refills, except seizure medications. These drugs may only be refilled a maximum of five times within 6 months if so indicated by the prescriber. Schedule II drugs cannot be refilled.

5. Prescriptions for all drugs other than controlled drugs are limited to a 1 month supply and refilled up to five times, if so indicated by the prescriber and not further controlled by local policy. Birth control pills, premarin, provera, pre-natal vitamins, and iron tablets (if prescribed one daily) are authorized a 3 month supply maximum and three refills.

NEW DRUG REQUEST

The following procedure will be used by the USAF Hospital Little Rock medical staff for procuring a medication not on the formulary when no suitable substitute exists. Contact the pharmacist if any question arises regarding therapeutic substitutes currently available.

1. Obtain DD Form 2081, New Drug Request, from the pharmacist. Complete items I through II and forward the form to the pharmacist for approval by the Pharmacy and Therapeutics Committee (P&T).

2. The P&T Committee meets on the third Thursday of the month at 1500 hours. Practitioners are encouraged to attend the meeting to clarify any questions regarding requests.

3. Requests must be submitted to the pharmacy no later than the week prior to the meeting.

COST COMPARISON

The following is a cost comparison per 100 tablets/capsules:

ANTIBIOTICS/ANTI-INFECTIVES

Gantrisin 500 mg	$ 1.95
Tetracycline 250 mg	2.09
Pen VK 250 mg	2.42
Ampicillin 250 mg	3.54
Erythromycin 250 mg	5.22
Oxacillin 250 mg	9.18
Velosef 250 mg	27.83

DIURETICS

HCTZ 50 mg	$ .36
Aldactone 25 mg	5.20
Lasix 40 mg	3.37
Dyazide	7.52
Dyrenium 100 mg	8.22
Hygroton 100 mg	15.35

ANTIHISTAMINES/DECONGESTANTS

CTM 4 mg	$ .27
Sudafed 30 mg	.40
Sudafed 60 mg	.65
Actifed	.72
CTM 8 mg SA	4.97
Dimetapp Extentab	2.84
Drixoral	10.66

NON-STEROIDAL ANTI-INFLAMMATORY

Aspirin 325 mg	$ .32
Ecotrin 325 mg	1.13
Disalcid 500 mg	5.97
Motrin 400 mg	9.73
Motrin 600 mg	13.61
Indocin 25 mg	15.67
Tolectin DS	18.12
Naprosyn 250 mg	20.47
Clinoril 150 mg	30.89
Feldene 20 mg	72.00

HYPOTENSIVE AGENTS

Reserpine 0.25 mg	$ .24
Apresoline 25 mg	.51
Inderal 10 mg	4.50
Lopressor 50 mg	7.40
Inderal 40 mg	9.27
Aldomet 250 mg	10.50
Minipres 1 mg	10.77
Ismelin 10 mg	15.29
Lopressor 100 mg	13.32
Minipres 2 mg	15.00
Catapres 0.2 mg	18.40
Minipres 5 mg	25.56
Procardia 10 mg	16.75
Diltiazem 60 mg	26.55
Verapamil 80 mg	19.38

TOPICAL S

Aristocort (Kenalog) cr 15 gm	$ .35
Aristocort (Kenalog) cr 60 gm	.56
1% HC cr 30 gm	.71
Synalar Lotion 20 cc	1.92
HC valerate 0.2% (Westcort) 15 gm	1.61
Valisone cr 15 mg	3.01
Aristocort "A" cr 60 gm	2.37
Lidex cr 15 gm	4.10
Lidex oint 15 gm	4.10
Topsyn gel 15 gm	4.10
Valisone cr 45 gm	5.86
Lidex cr 60 gm	10.08
Lidex oint 60 gm	10.08

POTENCY RANKING OF SOME COMMONLY USED TOPICAL STEROIDS

Group 1 is the most potent, group 6--the least potent. The ranking is based on vasoconstriction studies and clinical trials. All agents stocked at this pharmacy are flourinated except hydrocortisone cream and Westcort cream. There is no significant difference among agents in any given group.

BRAND NAME	GENERIC NAME	TYPES OF DERMATOSES
GROUP 1		
Diprosone oint 0.05%	Bethamethasone Dipropionate	Discoid lupus Erythematosus
Florone oint 0.05%	Diflorasone diace.	
Halog cr 0.1%	Halcinonide	
*Lidex cr 0.05%	Flucinonide	"Dyshidrotic" hand eczema
*Lidex oint 0.05%	Flucinonide	(recalcitrant)
Topicort cr 0.25%	Desoximetasone	
*Topsyn gel 0.05%	Flucinonide	Lichen planus (recalcitrant)
GROUP 2		
Aristocort cr 0.5% HP	Triamcinolone ace.	Lichen simplex chronicus
Diprosone cr 0.05%	Betamethasone dipropionate	(recalcitrant)
Benisone gel 0.025%	Betamethasone ben.	
Valisone oint 0.1%	Betamethasone val.	Psoriasis (recalcitrant)
GROUP 3		
Aristocort oint 0.1%	Triamcinolone ac.	Allergic contact dermatitis
*Cordran oint 0.05%	Flurandrenolide	(severe generalized forms may
Kenalog oint 0.1%	Triamcinolone ac.	require parenteral steroids)
Synalar oint 0.025%	Fluocinolone ac.	Atopic dermatitis
Synalar-HP cr 0.2%	Fluocinolone ac.	
Valisone lotion 0.1%	Betamethasone val.	
Westcort oint 0.2%	Hydrocortisone val.	

BRAND NAME	GENERIC NAME	TYPES OF DERMATOSES
GROUP 4		
Cordran cr 0.05%	Flurandrenolide	"Dyshidrotic" hand eczema
Fluonid cr 0.01%	Fluocinolone ac.	
*Kenalog cr 0.1%	Triamcinolone ac.	Lichen planus
Kenalog lotion 0.025%	Triamcinolone ac.	Lichen simplex chronicus
Synalar cr 0.025%	Fluocinolone ac.	Psoriasis
*Valisone cr 0.1%	Betamethasone val.	
*Westcort cr 0.2%	Hydrocortisone val.	
GROUP 5		
Alphaderm cr 1%	Hydrocortisone 1%, urea 10%	Intertrigo
Locorten cr 0.03%	Flumethasone piv.	
Tridesilon cr 0.05%	Desonide	Primary irritant dermatitis
GROUP 6		
*Cort-Dome cr 1% or 0.5%	*Hydrocortisone 1% or 0.5%	Pruritus ani
Hexadol cr 0.04%	Dexamethasone	
Medrol Acetate oint 0.25% or 0.1%	Methylprednisolone	Seborrheic dermatitis
Meti-Derm cr 0.5%	Prednisone	

*Topical steroids stocked at this facility.

Basic potency range for most children are groups 5 and 6.

This table is adopted from "Perspectives in Topical Glucocorticosteroid Therapy" with permission of the author and publisher.

ORAL CONTRACEPTIVES

	PROGESTOGEN	ESTROGEN
SECOND GENERATION FORMULATIONS		
Ortho Novum 1/50 (Norinyl 1/50, Ovcon 50)	1 mg norethindrone	50 mcg mestranol
Ortho Novum 1/80 (Norinyl 1/80)	1 mg norethindrone	80 mcg mestranol
Demulen	1 mg ethynodiol diacetate	50 mcg ethinyl estradiol
Ovral	0.5 mg norgestrel	50 mcg ethinyl estradiol
LOW DOSE FORMULATIONS		
Ortho Novum 1/35	1 mg norethindrone	35 mcg ethinyl estradiol
**Modicon (Brevicon)	0.5 mg norethindrone	35 mcg ethinyl estradiol
Lo Ovral	0.3 mg norgestrel	30 mcg ethinyl estradiol

** Deleted when present stock expires 7/85

ADVERSE DRUG REACTION (ADR) REPORTING PROCEDURES

1. The Food and Drug Administration (FDA) has operated a reporting system for adverse drug reactions since 1960. Spontaneous reporting by physicians, nurses, dentists, and other health care practitioners has been the most valuable source for early detection of new, unexpected, and rare adverse reactions. ADRs help to provide information to update drug product labeling. Withdrawal of drugs from the market also has been prompted by ADRs.

2. Suspected ADRs should be reported to the pharmacy. The pharmacy will provide copies of FD Form 259, Pharmacist's Drug Problem Report, or FD Form 1639a, Drug Experience Report. Either of these forms may be completed. The pharmacist is available for any assistance necessary for proper completion of the form. The drug experiences of greatest value include:

   a. New and unexpected reactions not listed in the labeling.

   b. Serious, life-threatening, or fatal reactions.

   c. Potential association of drugs with congenital abnormalities.

   d. Therapeutic failure of a drug which suggests problems with bioavailability, e.g., absorption.

3. ADRs are often difficult to determine in complex clinical settings. If in doubt, call the pharmacy, for assistance. New changes in regulations by the FDA will probably result in increased numbers of new drugs released for marketing each year. This increases the potential risks of ADRs occurring in our patients. Let's keep your eyes open and report reactions when they occur.

DRUG UTILIZATION REVIEW PROCESS

1. P&T chairman and pharmacist select criteria. Criteria shall be disseminated to the medical staff prior to DUR.

2. Select drug at previous month's P&T Committee Meeting and determine the target date for completion of the audit.

3. Collect records. Data retrieval will ordinarily be done from prescriptions or drug orders received by the Pharmacy. A list of patients' names and SSANs will be forwarded to Medical Records for the records to be pulled.

4. Pharmacist will distribute records to be audited and a copy of criteria to physicians who are on the P&T Committee. These records will be distributed to physicians on the Monday prior to the P&T Committee Meeting.

5. Physicians will separate out records not meeting the criteria and document the reasons for submission to the P&T Committee on Thursday following receipt of the records.

6. Forward results of the DUR performed by the P&T Committee to the Patient Care Evaluation Committee.

FOLLOW UP

1. Distribute minutes to all practitioners.

2. Report findings in newsletters.

3. Significant problems presented to professional staff meetings.

4. Another study p.r.n.

5. Antibiotic review results sent to Infection Committee.

6. All reviews sent to QA/RM Committee.

ORAL CEPHALOSPORINS

The oral cephalosporins are relatively new agents and are protected by patent rights. They are among the most expensive orally used antimicrobial agents. There are few instances where they are the primary drugs of choice for any infection. Less expensive and equally effective drugs should be used unless the organism is resistant to or the patient exhibits an untoward reaction to the agent of first choice. Cephalosporins are generally ineffective in the treatment of infections due to haemophilus influenzae, pseudomonas, and group D streptococci. The capricious use of cephalosporins will lead to resistance and the eventual loss of these agents for treatment of serious infections.

INDICATIONS FOR USE OF DRUGS

Criteria: For urinary tract infections (standard 100%)

1. There is culture evidence of infection (more than 100,000 bacterial/ml of urine), and (Exception: less than 100,000 bacteria/ml is acceptable if specimen is obtained by suprapubic aspiration or other procedure that bypasses the urethra, e.g., surgery.)

2. Organism is identified as being sensitive to a cephalosporin antibiotic, and

3. Organism is either resistant to ampicillin, tetracycline, septra (bactrim), nitrofurantoin, and nalidixic acid, or patient has history of allergy or adverse reaction to effective agents, or

4. There is an elevated bun level (more than 20mg/100 ml).

For staphylococcal infection: (standard 100%)

1. Chart indicates site of infection (e.g., blood, wound) and

2. Organism is identified by culture and known to be sensitive to a cephalosporin antibiotic, and (exception: gram stain of purulent material shows gram-positive organism (suggestive of staphylococcus).)

3. Organism is resistant to or the patient is allergic to penicillin b.

4. Agent cannot be administered parenterally. (Exception: oral use must be justified because of a problem with giving IM or IV injections, if the patient is being treated on an outpatient basis, if therapy is follow up to previous successful response to a parental agent (such as cefazolin sodium) or the lesion is limited to the skin or subcutaneous tissue.

For probable pneumococcal or group A streptococcal infections (The drug of choice is penicillin; in allergic patients, erythromycin): (Standard 100%)

1. The chart indicates suspicion or cultural evidence of infection with these organisms, and

2. Clinical condition is either pneumonia, pharyngitis, cellulitis, acute otitis (in adults), or sinusitis (in adults), and

3. Patient is allergic to penicillin or as a history of adverse reaction to erythromycin.

PARENTERAL CEPHALOSPORINS

ITEM NO.	CRITERIA	STANDARD	EXCEPTIONS	DATA RETRIEVAL
	For Staphylococcal Infection	100%		Inpatient Record
1.	Chart indicates the site of infection (e.g., blood, urine, wound site), and			
2.	Organism is identified by culture and shown to be sensitive to a cephalosporin.		2. Therapy is started prior to availability of culture or sensitivity test results (that were ordered before or at the time medication was started), and either gram stain of purulent material suggests Staphylococcus infection or WBC count is less than 3,000/cu mm.	
	For probable pneumococcal or Group A streptococcal infections.			
1.	The chart indicates suspicion or cultural evidence of infection with these organisms, and	100%	None	Inpatient Record
2.	The clinical condition is pneumonia, pharyngitis, cellulitis, acute otitis (in adults), or sinusitis (in adults), and	100%	None	

ITEM NO.	CRITERIA	STANDARD	EXCEPTIONS	DATA RETRIEVAL
3.	The patient is allergic to penicillin	100%	None	
	For established or highly suspect infection due to gram-negative enteric aerobic bacteria.			
1.	Indications are the same as for parenteral aminoglycosides.	100%	1. Pseudonomas or Serratia is not suspected or found to be present. 2. The patient does not have meningitis. 3. Drug is not used alone if patient has leukopenia (WBC count, less than 3,000 cu/mm) and fever (more than 38 C) unless the organism is known to be sensitive to cephalosporin antibiotics.	Inpatient Record.
	For pneumonia due to gram-negative aerobic organisms.			
1.	Chart shows that a gram-negative aerobic organism other than Pseudomonas or Serratia was recovered from expectorated sputum, and	100%	1-5. Transtrachael aspirate shows any gram-negative organism sensitive to cephaloporins, or culture of pleural fluid or blood shows sensitive organism.	Inpatient Record.
2.	The gram stain of the sputum shows abundant gram-negative rods mixed with polymorphonuclear leukocytes, and	100%	2. Leukopenia is present.	Inpatient Record.

ITEM NO.	CRITERIA	STANDARD	EXCEPTIONS	DATA RETRIEVAL
3	Fever (more than 38 C) is present, and			
4	The patient has leukocytosis (WBC count, 10,000/cu mm or more or leukopenia (as defined previously), and			
5	A pulmonary infiltrate (pneumonia) is seen on roetgenogram			

CIMETIDINE

TOPIC REVIEW:

Cimetidine is an extremely effective drug under select clinical circumstances where the inhibition of the secretion of hydrochloric acid is an effective part of therapy. This drug is an exceedingly expensive drug when not used selectively. Excessive drug use occurs when administered for less than adequate indications or for periods well in excess of those indicated by the current standards of medical practice.

OBJECTIVE: Optimal medical care will be encouraged through a coordinated policy and development of medical criteria for the use of this drug. The medical staff will be advised of the expectations of management. The subsequent compliance will then be measured by a 100% audit. A secondary benefit will be to control costs by enforcing and correcting deficient prescribing practices.

METHOD AND DATA RETRIEVAL: At a specified start date, every prescription for cimetidine will be listed by Pharmacy personnel for retrieval of the outpatient record. Outpatient records will then be measured by an assigned physician and medical records technician against the below-cited criteria. The results will be reported to the quality Assurance Review Committee. Follow-up action, as indicated, will be the responsibility of supervision, the Chief of Professional Services, and ultimately, the DPMS, as required.

INDICATIONS FOR USE OF CIMETIDINE

ITEM NO.	CRITERIA	STANDARD	EXCEPTIONS	DATA RETRIEVAL
1.	Duodenal ulcer documented by x-ray or endoscopy. Dosage: 300mg h.c. & h.s. Duration: 8 weeks.	100%		Outpt records; Pharmacy listing.
2.	Recalcitrant reflux esophagitis. Dosage: 300 mg a.c. & h.s. Duration: Indefinitely.	100%		Outpt records; Pharmacy listing.

ITEM NO.	CRITERIA	STANDARD	EXCEPTIONS	DATA RETRIEVAL
3.	Hypersecretive state (Zollinger-Ellison syndrome). Dosage: 30 mg h.c. & h.s. May be up to 2400 mg/day. Duration: Indefinitely.	100%		Outpt records; Pharmacy listing.
4.	Gastric ulcer acid production Dosage: 300 mg a.c. & h.s. Duration: 8 weeks.	100%		Outpt records; Pharmacy listing.
5.	Endoscopically confirmed duodenitis. Dosage: 300 mg a.c. & h.s. Duration: 8 weeks.	100%		Outpt records;
6.	Upper GI hemorrhage 2^{0} to presumed peptic causes. Dosage: 300 mg IV q 6h Duration: Until oral therapy can be instituted.	100%		Inpt records; Pharmacy listing.
			1. Prophylaxis of peptic ulcer disease. Dosage: 400 mg at bedtime. Duration: Indefinitely.	Outpt records; Pharmacy listing.
			2. Duodenal ulcer with recurrence of symptoms after decreasing dosage. Dosage: 300 mg a.c. & h.s. Duration: Longer with 8 weeks.	Outpt records; Pharmacy listing.

REPORTED SIDE EFFECTS OF TAGAMET THERAPY | YES | NO

1. Transient neutropenia
2. Bradycardia and functional bradyarrhythmias
3. Gynecomastia
4. Headaches
5. Drowsiness
6. Diarrhea
7. Elevation of SGOT
8. Increased serum creatinine
9. Skin rash
10. Was the drug discontinued because of the reported side effects?

SPECIAL CONSIDERATIONS OF TAGAMET THERAPY

Please mark the appropriate column:

1. If nocturnal pain persists, was an anticholinergic added to therapy?
2. If renal failure occurs, was the Tagamet dosage reduced by one half?

YES NO

3. If on indefinite therapy, were the following tests ordered at last every six months?
   a. Complete blood count.
   b. Liver function tests.

QUALITY OF THERAPY

Please mark the appropriate column.

1. Based on the diagnosis, should Tagamet have been prescribed?
2. Was the correct dosage prescribed?
3. Was the therapy continued for the appropriate length of time?
4. Was this patient's therapy considered to be appropriate?
   a. If no, what suggestions would you make to improve therapy?

_____
_____
_____
_____
_____
_____
_____

CRITERIA FOR DESYREL

1. Patients with a previous history of intolerable anticholinergic side effects induced by tricyclic or other second generation antidepressants.

2. Patients with underlying disorders that would be adversely affected by antidepressants with anticholinergic actions (e.g., severe angle closure glaucoma, prostatic hypertrophy, organic mental disorder).

3. Patients with cardiac conduction disturbances known to be aggravated by tricyclic antidepressants.

4. Patients with endogeneous depression documented to be refractory to tricyclic antidepressants and in whom electroshock therapy is contraindicated.

Medical Letter, 30 Mar 84:

Twelve reports from different areas in USA of priapism in men taking trazodone, in some cases leading to permanent impotence.

Use as first line drug in men should be limited to patients with prostatic enlargement or others for whom absence of anticholinergic effects is major advantage. Inappropriate or prolonged erection(s) occur in patients taking trazodone - if so, the drug should be discontinued immediately.

CRITERIA FOR USE OF FELDENE

1. Start with aspirin or enteric coated aspirin, usually at doses of 3.6 grams daily in 3 to 4 divided doses.

2. Try at least three other nonsteroidal agents and document in chart that patient cannot tolerate or therapy unsuccessful.

3. Instruct patients to take the medication with food or milk to decrease local GI irritation.

4. If GI intolerance develops, other NSAIDs can be tried, but cost should be a part of the decision making process.

5. Special situations such as renal insufficiency, aspirin allergy, or particular disease characteristics (e.g., Indocin use in ankylossing spondylitis) may mitigate for the use of nonaspirin NSAIDs.

6. Not for use in pregnancy.

MINOCIN CRITERIA

1. Should be used in the treatment of acne only after clinical failure with the use of Tetracycline and Erythromycin. If a patient fails to respond to a 6-week course of both these agents, then Minocin is a logical third choice.

2. Topical antibiotics and drying agents should also be tried prior to using Minocin.

RITALIN DUR

GUIDELINES FOR UNIFORM TREATMENT WITH RITALIN FOR ATTENTION DEFICIENT DISORDERS (ADD)

1. Age of Patient at Onset of Treatment: 5 years to 14 years.

2. Duration of Treatment: Varies from 2 months to 83 months. Mean duration of treatment is 26 months.

3. Letters of Progress from School While on Treatment: Necessary at intervals of no more than 6 months.

4. Height and Weight: Required at intervals of no more than 6 months.

5. Behavior Modification Attempts: Should be attempted and results charted for all patients.

6. CBC, Differential, Platelet Estimate, and SGOT: Required at 6 month intervals.

7. Medication Discontinued in Summer: Recommended unless patient is in summer school. Need for resumption of treatment in fall when school resumes will be determined then.

8. Over One Year Since Physician has been in Contact with Patient Through Regular Appointment: Unsatisfactory. There should not be an interval longer than 6 months.

9. Psychometrics: Required for all patients treated. Schools may have done psychometrics already and these records can be requested.

10. Physician's Comments on Office Behavior: Necessary, but it may be inaccurate since brief observations in the office may not recognize hyperactivity. The significance of "normal office behavior" may be nil.

CRITERIA FOR USE OF NSAIDS IN ARTHRITIC CONDITIONS

1. Start with aspirin or enteric coated aspirin, usually at doses of 3.6 grams daily in 3 to 4 divided doses.

2. Instruct patients to take the medication with food or milk to decrease local G.I. irritation.

3. If G.I. intolerance develops, other NSAIDs can be tried but cost should be a part of the decision- making process.

4. Special situations such as renal insufficiency, aspirin allergy, or particular disease characteristics (e.g., Indocin use in anklyossing spondylitis) may mitigate for the use of non-aspirin NSAIDs.

5. Prior to using the more expensive NSAIDs, i.e., Naprosyn, Clinoril, or Feldene, two or three of the less expensive medications should be tried.

Some thoughts about NSAIDs:

1. Newer NSAIDs are more effective than aspirin.

2. All NSAIDs produce G.I. toxicity although the relative incidence is difficult to assess. Endoscopic evidence of gastritis as well as long term effects, such as development of ulcers and effects on renal function appear to be similar for aspirin and other NSAIDs.

3. Salicylates can be monitored by blood levels, allowing assessment of compliance and proper dosing for maximal benefit.

Chemical Classes of Antiarthritic Drugs:

Pyrazoles: Butazolidin

Acetic Acids: Indocin
Clinoril
Tolectin

Salicylates: Aspirin
Ecotrin
Disalcid

Propionic Acids: Motrin
Naprosyn
Nalfon (not on the formulary)

Fenamates: Meclomen (not on the formulary)

Oxicams: Feldene

CRITERIA FOR PRESCRIBING TYLENOL #3

1. Goal is to determine appropriateness of drug as well as clinical management of the patient.

2. Was medication documented in the medical record?

3. Was the amount prescribed reasonable in consideration of the patient's condition?

4. Opioids should be used only when other drugs or physical measures will not provide relief of pain. One should give the smallest doses that provide adequate analgesia. Dose should be one tablet for mild to moderate pain and two tablets for moderate to severe pain.

5. Safe dosage of the elixir has not been established in children below the age of three. Tablets should not be administered to children under age 12.

6. Opioids are contraindicated in certain disease states (e.g., suspected surgical abdomen) in which the pattern and degree of pain are important diagnostic signs. Similarly, their administration to patients with acute head injuries may complicate accurate assessment of neurological changes.

7. Opioids should be used with extreme caution in patients with hypothyroidism, Addison's disease, hypopituitarism, anemia, reduced blood volume, head trauma, asthma, severe malnutrition, of debilitation. Since these drugs are metabolized in the liver, patients with hepatic disease may be inordinately sensitive to the usual dosage. Phenothiazines, antidepressants, and CNS depressant drugs may markedly potentiate the adverse effects of opioids. If it becomes necessary to use opioids in any of these settings, very small doses should be used initially.

CRITERIA FOR PRESCRIBING VALIUM

1. Does the prescription exceed 30-day supply and no refills policy established by the P&T Committee?

2. Was it written for an indicated use: Short term anxiety, acute alcohol withdrawal, skeletal muscle relaxant, or premedication for relief of anxiety in patients prior to endoscopic or surgical procedures?

3. Contraindications: Depression, suicidal tendencies, acute narrow angle and open angle glaucoma, shock, coma, first trimester of pregnancy, and psychotic disorders.

4. Interactions: Cimetidine, Levo-Dopa, Phenytoin, alcohol, narcotic analgesics, sedatives, hypnotics, and other CNS depressants.

5. Is the patient clinically managed well? Was there at least evaluations every 6 months on patients on continuous therapy?

4:00 ANTIHISTAMINES
- BROMPHENIRAMINE MALEATE NF
- CHLORPHENIRAMINE MALEATE USP
- CYPROHEPTADINE HYDROCHLORIDE
- DEXBROMPHENIRAMINE
- DIPHENHYDRAMINE HYDROCHLORIDE USP
- PROMETHAZINE HYDROCHLORIDE USP
- TRIMEPRAZINE TARTRATE
- TRIPROLIDINE HYDROCHLORIDE

8:00 ANTI-INFECTIVE AGENTS

8:04 AMEBACIDES
- METRONIDAZOLE

8:08 ANTHELMINTICS
- MEBENDAZOLE
- PYRANTEL PAMOATE

8:12 ANTIBIOTICS

8:12.02 AMINOGLYCOSIDES
- GENTAMICIN SULFATE
- NEOMYCIN (SYSTEMIC)

8:12.04 ANTIFUNGAL ANTIBIOTICS
- GRISEOFULVIN USP
- KETOCONAZOLE
- NYSTATIN (SYSTEMIC)

8:12.06 CEPHALOSPORINS
- CEFACLOR
- CEFAZOLIN SODIUM
- CEPHRADINE

8:12.08 CHLORAMPHENICOL
- CHLORAMPHENICOL (SYSTEMIC)

8:12.12 ERYTHROMYCINS
- ERYTHROMYCIN (SYSTEMIC)

8:12.16 THE PENICILLINS
- AMOXICILLIN
- AMPICILLIN
- CARBENICILLIN INDANYL SODIUM
- CARBENICILLIN, DISODIUM
- NAFCILLIN
- OXACILLIN SODIUM USP
- PENICILLIN G, BENZATHINE USP
- PENICILLIN G, BENZATHINE AND PENICILLIN G, PROCAINE
- PENICILLIN G, PROCAINE USP
- PENICILLIN G, SODIUM
- PENICILLIN V
- PIPERACILLIN

8:12.24 THE TETRACYCLINES
- MINOCYCLINE HYDROCHLORIDE
- TETRACYCLINE (SYSTEMIC)

8:12.28 OTHER ANTIBIOTICS
- CEFOXITIN
- CLINDAMYCIN (SYSTEMIC)
- SPECTINOMYCIN

8:16 ANTITUBERCULARS
- ETHAMBUTOL
- ISONIAZID USP

-CONTINUED-

8:00 ANTI-INFECTIVE AGENTS
RIFAMPIN
8:20 PLASMODICIDES
CHLOROQUINE
CHLOROQUINE PHOSPHATE AND PRIMAQUINE PHOSPHATE TABLETS
HYDROXYCHLOROQUINE SULFATE USP
QUININE
8:24 SULFONAMIDES
SULFAMETHOXAZOLE
SULFASALAZINE
SULFISOXAZOLE (SYSTEMIC)
TRIMETHOPRIM/SULFAMETHOXAZOLE
8:26 SULFONES
DAPSONE
8:32 TRICHOMONACIDES
METRONIDAZOLE
8:36 URINARY GERMICIDES
METHENAMINE MANDELATE USP
NALIDIXIC ACID
NITROFURANTOIN USP
8:40 OTHER ANTI-INFECTIVES
ERYTHROMYCIN - SULFISOXAZOLE

10:00 ANTINEOPLASTIC AGENTS
CYCLOPHOSPHAMIDE NF
FLUOROURACIL (SYSTEMIC)
METHOTREXATE USP
MITOMYCIN (MITOMYCIN-C)
VINCRISTINE

12:00 AUTONOMIC DRUGS
12:04 PARASYMPATHOMIMETIC -CHOLINERGIC- AGENTS
BETHANECHOL CHLORIDE USP
NEOSTIGMINE
PHYSOSTIGMINE SALICYLATE
12:08 PARASYMPATHOLYTIC -CHOLINERGIC BLOCKING- AGENTS
ATROPINE SULFATE (SYSTEMIC)
BELLADONNA
BELLADONNA AND PHENOBARBITAL
BENZTROPINE MESYLATE NF
DICYCLOMINE HYDROCHLORIDE
GLYCOPYRROLATE
ORPHENADRINE CITRATE
PROPANTHELINE BROMIDE USP
TRIHEXYPHENIDYL HYDROCHLORIDE USP
12:12 SYMPATHOMIMETIC -ADRENERGIC- AGENTS
ALBUTEROL
DOPAMINE HYDROCHLORIDE
EPHEDRINE NF
EPINEPHRINE (SYMPATHOMIMETIC)
ISOETHARINE
ISOMETHEPTENE
ISOPROTERENOL HYDROCHLORIDE USP
LEVARTERENOL

-CONTINUED-

12:00 AUTONOMIC DRUGS
METAPROTERENOL SULFATE
PHENYLPROPANOLAMINE
PSEUDOEPHEDRINE HYDROCHLORIDE
RITODRINE
TERBUTALINE SULFATE
12:16 SYMPATHOLYTIC -ADRENERGIC BLOCKING- AGENTS
DIHYDROERGOTAMINE
ERGOTAMINE TARTRATE USP
PHENTOLAMINE MESYLATE USP
12:20 SKELETAL MUSCLE RELAXANTS
CHLORZOXAZONE AND ACETAMINOPHEN
CYCLOBENZAPRINE HYDROCHLORIDE
METHOCARBAMOL
SUCCINYLCHOLINE CHLORIDE USP

16:00 BLOOD DERIVATIVES
ALBUMIN HUMAN

20:00 BLOOD FORMATION AND COAGULATION
20:04 ANTIANEMIA DRUGS
20:04.04 IRON PREPARATIONS
FERROUS SULFATE USP
IRON DEXTRAN
20:12 COAGULANTS AND ANTICOAGULANTS
20:12.04 ANTICOAGULANTS
HEPARIN SODIUM USP
WARFARIN SODIUM USP
20:12.08 ANTIHEPARIN AGENTS
PROTAMINE SULFATE

24:00 CARDIOVASCULAR DRUGS
24:04 CARDIAC DRUGS
BRETYLIUM TOSYLATE
DIGOXIN USP
DISOPYRAMIDE PHOSPHATE
LIDOCAINE (CARDIAC)
NADOLOL
PROCAINAMIDE HYDROCHLORIDE USP
PROPRANOLOL HYDROCHLORIDE
QUINIDINE
QUINIDINE GLUCONATE
24:06 ANTILIPEMIC AGENTS
CHOLESTYRAMINE RESIN
CLOFIBRATE
GEMFIBROZIL
24:08 HYPOTENSIVE DRUGS
CAPTOPRIL
CLONIDINE HYDROCHLORIDE
DIAZOXIDE
GUANETHIDINE SULFATE USP
HYDRALAZINE HYDROCHLORIDE NF
METHYLDOPA
METOPROLOL TARTRATE

-CONTINUED-

24:00 CARDIVASCULAR DRUGS
MINOXIDIL
PHENTOLAMINE MESYLATE USP
PRAZOSIN
PROPRANOLOL HYDROCHLORIDE
RESERPINE USP
24:12 VASODILATING AGENTS
AMYL NITRITE NF
DILTIAZEM
DIPYRIDAMOLE
ISOSORBIDE DINITRATE
ISOXSUPRINE HYDROCHLORIDE
NIFEDIPINE
NITROGLYCERIN
PENTAERYTHRITOL TETRANITRATE
VERAPAMIL

28:00 CENTRAL NERVOUS SYSTEM DRUGS
28:04 GENERAL ANESTHETICS
THIOPENTAL SODIUM USP
28:08 ANALGESICS AND ANTIPYRETICS
ACETAMINOPHEN NF
ALCOHOL USP
CODEINE SULFATE NF
FENTANYL
MEPERIDINE HYDROCHLORIDE NF
MORPHINE SULFATE USP
NALBUPHINE
OXYCODONE
PENTAZOCINE
PROPOXYPHENE HYDROCHLORIDE
28:08.04 NONSTEROIDAL ANTI-INFLAMMATORY AGENTS
ASPIRIN USP
IBUPROFEN
INDOMETHACIN
NAPROXEN
PHENYLBUTAZONE NF
PIROXICAM
SALSALATE
SULINDAC
TOLMETIN
28:10 NARCOTIC ANTAGONISTS
NALOXONE HCL
28:12 ANTICONVULSANTS
CARBAMAZEPINE
CLONAZEPAM
ETHOSUXIMIDE
MAGNESIUM SULFATE USP
MEPHOBARBITAL NF
PHENOBARBITAL USP
PHENYTOIN
PRIMIDONE USP
VALPROIC ACID
28:16 PSYCHOTHERAPEUTIC AGENTS

-CONTINUED-

28:00 CENTRAL NERVOUS SYSTEM DRUGS
28:16.04 ANTIDEPRESSANTS
AMITRIPTYLINE HYDROCHLORIDE
DOXEPIN HYDROCHLORIDE
IMIPRAMINE HYDROCHLORIDE NF
NORTRIPTYLINE HYDROCHLORIDE
TRAZODONE
28:16.08 TRANQUILIZERS
CHLORPROMAZINE HYDROCHLORIDE USP
HALOPERIDOL
HYDROXYZINE
PERPHENAZINE
PROCHLORPERAZINE
THIORIDAZINE HYDROCHLORIDE
TRIFLUOPERAZINE HYDROCHLORIDE
28:20 RESPIRATORY AND CEREBRAL STIMULANTS
CAFFEINE USP
METHYLPHENIDATE HYDROCHLORIDE NF
PEMOLINE
28:24 SEDATIVES AND HYPNOTICS
CHLORAL HYDRATE
CHLORDIAZEPOXIDE HYDROCHLORIDE NF
DIAZEPAM
FLURAZEPAM HYDROCHLORIDE
MEPHOBARBITAL NF
MEPROBAMATE NF
OXAZEPAM
PENTOBARBITAL SODIUM USP
PHENOBARBITAL USP
PROMETHAZINE HYDROCHLORIDE USP
SECOBARBITAL SODIUM USP
THIOPENTAL SODIUM USP
28:28 ANTIMANIC AGENTS
LITHIUM

34:00 DENTAL AGENTS
ORAL PROTECTIVE BASE
STANNOUS FLUORIDE
TRIAMCINOLONE (EMOLLIENT PASTE)

36:00 DIAGNOSTIC AGENTS
36:26 DIABETES MELLITUS
GLUCOSE OXIDASE REAGENT (BLOOD TESTS)
36:36 GASTRIC FUNCTION
ALCOHOL USP
HISTAMINE PHOSPHATE USP
36:40 KIDNEY FUNCTION
MANNITOL NF
36:56 MYASTHENIA GRAVIS
EDROPHONIUM CHLORIDE USP
NEOSTIGMINE
36:64 PHEOCHROMOCYTOMA
HISTAMINE PHOSPHATE USP
PHENTOLAMINE MESYLATE USP

-CONTINUED-

36:00 DIAGNOSTIC AGENTS
36:88 URINE CONTENTS
CUPRIC SULFATE REAGENT
GLUCOSE OXIDASE REAGENT (URINE TESTS)
NITROPRUSSIDE SODIUM (DIAGNOSTIC)
URINE CONTENTS DIAGNOSTIC AGENTS

40:00 ELECTROLYTIC, CALORIC, AND WATER BALANCE
40:08 ALKALINIZING AGENTS
SODIUM BICARBONATE USP
SODIUM CITRATE
40:12 REPLACEMENT ION THERAPY
CALCIUM CARBONATE
CALCIUM CHLORIDE USP
CALCIUM GLUBIONATE
CALCIUM GLUCEPTATE USP
CALCIUM LACTATE NF
INTRAVENOUS SOLUTIONS, ADDITIVE PRODUCTS, AND ACCESSORIES
POTASSIUM CHLORIDE USP
SODIUM CHLORIDE USP
40:20 CALORIC AGENTS
AMINO ACID, CRYSTALLINE
AMINO ACIDS
DEXTROSE USP
FAT EMULSION
PROTEIN HYDROLYSATE
STANDARD DIET
40:28 DIURETICS
CHLORTHALIDONE
FUROSEMIDE
HYDROCHLOROTHIAZIDE USP
MANNITOL NF
SPIRONOLACTONE USP
TRIAMTERENE
40:36 IRRIGATING SOLUTIONS
ACETIC ACID USP
SODIUM CHLORIDE USP
40:40 URICOSURIC AGENTS
PROBENECID USP
SULFINPYRAZONE

48:00 EXPECTORANTS AND COUGH PREPARATIONS
ACETYLCYSTEINE
BENZONATATE
CODEINE PHOSPHATE USP
CODEINE SULFATE NF
GUAIFENESIN
POTASSIUM IODIDE USP
TERPIN HYDRATE NF

52:00 EYE, EAR, NOSE, AND THROAT PREPARATIONS
52:04 ANTI-INFECTIVES
52:04.04 ANTIBIOTICS
GENTAMICIN SULFATE (EENT)

-CONTINUED-

POLYMYXIN B SULFATE (EENT)
52:04.06 ANTIVIRALS
IDOXURIDINE
VIDARABINE (EENT)
52:04.08 SULFONAMIDES
SULFACETAMIDE (EENT)
52:08 ANTI-INFLAMMATORY AGENTS
BECLOMETHASONE
DEXAMETHASONE (EENT)
FLUOROMETHOLONE (EENT)
HYDROCORTISONE (EENT)
PREDNISOLONE (EENT)
TRIAMCINOLONE (EMOLLIENT PASTE)
52:10 CARBONIC ANHYDRASE INHIBITORS
ACETAZOLAMIDE USP
52:16 LOCAL ANESTHETICS
ANTIPYRINE NF
BENZOCAINE
LIDOCAINE (EENT)
PROPARACAINE
52:20 MIOTICS
PILOCARPINE HYDROCHLORIDE USP
52:24 MYDRATICS
ATROPINE SULFATE (OPHTHALMIC)
CYCLOPENTOLATE HYDROCHLORIDE USP
EPINEPHRINE (MYDRIATIC)
52:28 MOUTHWASHES AND GARGLES
CETYLPYRIDINIUM CHLORIDE NF
DIPHENHYDRAMINE HYDROCHLORIDE USP
HYDROGEN PEROXIDE USP
MOUTHWASH, ANESTHETIC AND ANTISEPTIC
PHENOL (EENT)
52:32 VASOCONSTRICTORS
NAPHAZOLINE HYDROCHLORIDE
OXYMETAZOLINE HYDROCHLORIDE
PHENYLEPHRINE (EENT VASOCONSTRICTOR)
TETRAHYDROZOLINE
52:36 UNCLASSIFIED PREPARATIONS
ACETIC ACID USP
ALUMINUM ACETATE USP
POLYVINYL ALCOHOL
TIMOLOL (EENT)
TRIETHANOLAMINE (EENT)

56:00 GASTROINTESTINAL DRUGS
56:04 ANTACIDS AND ABSORBENTS
ALUMINUM HYDROXIDE
CALCIUM CARBONATE
MAGNESIA AND ALUMINA SUSPENSION
56:08 ANTI-DIARRHEA AGENTS
DIPHENOXYLATE HYDROCHLORIDE
KAOLIN NF
LACTOBACILLUS ACIDOPHILUS

-CONTINUED-

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                    38:00 DIAGNOSTIC AGENTS
-CONTINUED-
                56:00 GASTROINTESTINAL ...
                    OPIUM  (ANTI-DIARRHEA)
          56:10 ANTI-INFLATULANTS
                    SIMETHICONE
          56:12 CATHARTICS
                    BISACODYL
                    CASCARA SAGRADA
                    DANTHRON
                    DEHYDROCHOLIC ACID  NF
                    DIOCTYL CALCIUM SULFOSUCCINATE
                    DIOCTYL SODIUM SULFOSUCCINATE  NF
                    MAGNESIUM CITRATE
                    MAGNESIUM SULFATE  USP
                    PSYLLIUM
                    SODIUM PHOSPHATE  (CATHARTIC)
          56:16 DIGESTANTS
                    PANCRELIPASE
          56:20 EMETICS AND ANTI-EMETICS
                    IPECAC USP
                    MECLIZINE HYDROCHLORIDE  USP
                    METOCLOPRAMIDE HYDROCHLORIDE
                    PROCHLORPERAZINE
                    TRIMETHOBENZAMIDE
          56:40 MISCELLANEOUS GASTRO-INTESTINAL DRUGS
                    CIMETIDINE
                    SUCRALFATE

     60:00 GOLD COMPOUNDS
          AUROTHIOGLUCOSE USP

     64:00 HEAVY METAL ANTAGONISTS
          DEFEROXAMINE MESYLATE
          PENICILLAMINE

     68:00 HORMONES AND SYNTHETIC SUBSTITUTES
          68:04 ADRENALS
                    BECLOMETHASONE
                    DEXAMETHASONE  (SYSTEMIC)
                    HYDROCORTISONE (SYSTEMIC)
                    METHYLPREDNISOLONE  (SYSTEMIC)
                    PREDNISONE  USP
                    TRIAMCINOLONE (SYSTEMIC)
          68:08 ANDROGENS
                    METHYLTESTOSTERONE
                    TESTOSTERONE
          68:12 CONTRACEPTIVES
                    ETHINYL ESTRADIOL  USP
                    ETHINYL ESTRADIOL COMBINATIONS
                    ETHYNODIOL DIACETATE
                    MESTRANOL COMBINATIONS
                    NORETHINDRONE
                    NORGESTREL
          68:16 ESTROGENS
                    DIENESTROL NF
                                   PAGE   5
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          68:00 HORMONES AND SYNTHETIC SUBSTITUTES
                    ESTROGENIC SUBSTANCES, CONJUGATED
                    ETHINYL ESTRADIOL  USP
          68:20 INSULINS AND ANTI-DIABETIC AGENTS
                    ACETOHEXAMIDE
                    CHLORPROPAMIDE  USP
                    GLUCAGON INJECTION  USP
                    TOLAZAMIDE
                    TOLBUTAMIDE  USP
                     68:20.08 INSULINS
                                   INSULIN ZINC SUSPENSION USP
                                   INSULIN, ISOPHANE
                                   INSULIN, REGULAR
          68:28 PITUITARY
                    VASOPRESSIN
          68:32 PROGESTOGENS
                    HYDROXYPROGESTERONE
                    MEDROXYPROGESTERONE ACETATE  USP
                    NORETHINDRONE
                    PROGESTERONE  (PROGESTOGEN)
          68:36 THYROID AND ANTI-THYROID
                    LEVOTHYROXINE SODIUM  USP
                    LIOTHYRONINE SODIUM
                    METHIMAZOLE  USP
                    POTASSIUM IODIDE  USP
                    PROPYLTHIOURACIL  USP
                    THYROID  USP

     72:00 LOCAL ANESTHETICS
          LIDOCAINE  (LOCAL AND TOPICAL ANESTHETIC)
          MEPIVACAINE HYDROCHLORIDE  NF

     76:00 OXYTOCICS
          METHYLERGONOVINE MALEATE

     80:00 SERUMS, TOXOIDS AND VACCINES
          80:04 SERUMS
                    ANTI-RABIES SERUM
                    CROTALINE ANTIVENIN
                    RABIES IMMUNE GLOBULIN (HUMAN)
                    RHO (D) IMMUNE SERUM GLOBULIN

     84:00 SKIN AND MUCOUS MEMBRANE PREPARATIONS
          84:04 ANTI-INFECTIVES
                     84:04.04 ANTIBIOTICS
                                   BACITRACIN (TOPICAL)
                                   CLINDAMYCIN (TOPICAL)
                                   ERYTHROMYCIN (TOPICAL)
                                   GENTAMICIN SULFATE (TOPICAL)
                                   POLYMYXIN B SULFATE (TOPICAL)
                     84:04.08 FUNGICIDES
                                   CLOTRIMAZOLE
                                   GENTIAN VIOLET USP
                                   NYSTATIN  USP
                                     PAGE   6
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-CONTINUED-

84:00 SKIN AND MUCOUS MEMBRANE PREPARATIONS
- THYMOL USP
- TRIAMCINOLONE (WITH TOPICAL FUNGICIDE)

84:04.12 SCABICIDES AND PEDICULICIDES
- BENZENE HEXACHLORIDE, GAMMA USP
- CROTAMITON

84:04.16 MISCELLANEOUS LOCAL ANTI-INFECTIVES
- ALCOHOL, ISOPROPYL
- BENZOYL PEROXIDE
- HEXACHLOROPHENE USP
- HYDROGEN PEROXIDE USP
- POVIDONE-IODINE
- SELENIUM SULFIDE USP
- SILVER SULFADIAZINE
- SULFANILAMIDE
- SULFATHIAZOLE
- THIMEROSAL

84:06 ANTI-INFLAMMATORY AGENTS
- BETAMETHASONE (TOPICAL)
- FLUOCINOLONE ACETONIDE
- FLUOCINONIDE
- FLURANDRENOLIDE
- HYDROCORTISONE (TOPICAL)
- TRIAMCINOLONE (TOPICAL ANTI-INFLAMMATORY)

84:08 ANTIPRURITICS AND LOCAL ANESTHETICS
- BENZOCAINE
- CHIGGER LOTION
- DIBUCAINE HYDROCHLORIDE USP
- LIDOCAINE (LOCAL AND TOPICAL ANESTHETIC)
- PHENAZOPYRIDINE

84:12 ASTRINGENTS
- ALUMINUM ACETATE USP

84:16 CELL STIMULANTS AND PROLIFERANTS
- TRETINOIN
- UREA (TOPICAL)

84:20 DETERGENTS
- HEXACHLOROPHENE USP
- POVIDONE-IODINE
- SULFUR

84:22 CONTRACEPTIVES (VAGINAL/INTRAUTERINE/DEVICES)

84:22.10 CONTRACEPTIVES(VAGINAL DEVICES)
- DIAPHRAGMS AND ACCESSORIES

84:24 EMOLLIENTS, DEMULCENTS AND PROTECTANTS

84:24.04 BASIC LOTIONS AND LINIMENTS
- CALAMINE

84:24.08 BASIC OILS AND OTHER SOLVENTS
- COLLODION, FLEXIBLE

84:24.12 BASIC OINTMENTS AND PROTECTANTS
- BENZOIN USP
- LANOLIN

84:24.16 BASIC POWDERS AND DEMULCENTS
- OATMEAL, COLLOIDAL

84:28 KERATOLYTIC AGENTS
- BENZOYL PEROXIDE

-CONTINUED-

84:00 SKIN AND MUCOUS MEMBRANE PREPARATIONS
- SALICYLIC ACID USP
- SILVER NITRATE USP

84:32 KERATOPLASTIC AGENTS
- COAL TAR USP

84:36 MISCELLANEOUS AGENTS
- ACETIC ACID USP
- FLUOROURACIL (TOPICAL)
- ISOTRETINOIN

84:50 PIGMENTING AND DEPIGMENTING AGENTS

84:50.06 PIGMENTING AGENTS
- TRIOXSALEN

86:00 SPASMOLYTIC AGENTS
- AMINOPHYLLINE USP
- FLAVOXATE
- PAPAVERINE HYDROCHLORIDE USP
- THEOPHYLLINE

88:00 VITAMINS

88:08 VITAMIN B COMPLEX
- CYANOCOBALAMIN USP
- FOLIC ACID USP
- NIACIN NF
- PYRIDOXINE HYDROCHLORIDE USP
- THIAMINE HYDROCHLORIDE USP
- VITAMIN B COMPLEX

88:12 VITAMIN C
- ASCORBIC ACID USP

88:24 VITAMIN K ACTIVITY
- PHYTONADIONE USP

88:28 MULTIVITAMIN PREPARATIONS
- VITAMINS, MULTIPLE
- VITAMINS, MULTIPLE WITH FLUORIDE

92:00 UNCLASSIFIED THERAPEUTIC AGENTS
- ALLOPURINOL
- BROMOCRIPTINE
- CLOMIPHENE CITRATE
- COLCHICINE USP
- CROMOLYN SODIUM
- DANTROLENE SODIUM (MALIGNANT HYPERTHERMIA)
- DISULFIRAM
- FORMALDEHYDE
- INSECT STING TREATMENT KIT
- METHYLENE BLUE NF
- PLACEBO
- STANNOUS FLUORIDE

96:00 PHARMACEUTICAL AIDS
- ALCOHOL USP
- POLYOXYETHYLENE SORBITAN MONOOLEATE

99:00 ANTIDOTES

-CONTINUED-

99:00 ANTIDOTES
METHYLENE BLUE NF
PENICILLAMINE

A-200 PYRINATE - SEE PYRETHRINS

ACCUTANE - SEE ISOTRETINOIN

ACETAMINOPHEN NF
TRADE NAME TYLENOL
TYLENOL WITH CODEINE
PERCOCET-5
CATEGORY 28:08 ANALGESIC AND ANTIPYRETIC
REGIMEN ADULT: 300-600 MG EVERY 4 HOURS NOT TO EXCEED 2.4 GM PER DAY.
PEDIATRIC: CHILDREN UP TO 3 MONTHS - 40 MG EVERY 4 TO 6 HOURS.
CHILDREN 12 TO 23 MONTHS - 120 MG EVERY 4 TO 6 HOURS.
CHILDREN 4 TO 5 YEARS - 240 MG EVERY 4 TO 6 HOURS.
CHILDREN 9 TO 10 YEARS - 400 MG EVERY 4 TO 6 HOURS.
PEDIATRIC DOSAGE SHOULD NOT EXCEED 4 TO 5 DOSES IN 24 HOURS
PERCOCET - 5: ADULT- ONE (1) TABLET EVERY SIX (6) HOURS.
ACETAMINOPHEN WITH CODEINE DOSAGE: ONE OR TWO TABLETS EVERY 4 HOURS.
DOSAGE FORM ACETAMINOPHEN TABLETS 325 MG *TYLENOL TABLETS*
ACETAMINOPHEN DROPS 10%
EACH 0.1 ML CONTAINS 10 MG ACETAMINOPHEN: 15 ML BOTTLE
WITH CALIBRATED DROPPER
ACETAMINOPHEN ELIXIR 160 MG PER 5 ML
ACETAMINOPHEN SUPPOSITORIES 325 MG
ACETAMINOPHEN SUPPOSITORIES 650 MG
ACETAMINOPHEN WITH CODEINE TABLETS 30 MG
*EMPRACET WITH CODEINE NO. 3*TYLENOL WITH CODEINE NO. 3*
EACH TABLET CONTAINS:
ACETAMINOPHEN 300 MG
CODEINE PHOSPHATE 30 MG
ACETAMINOPHEN WITH CODEINE ELIXIR (MANUFACTURED BY PHARMACY SERVICE)
EACH 5 ML CONTAINS:
ACETAMINOPHEN 120 MG
CODEINE PHOSPHATE 12 MG
ACETAMINOPHEN AND OXYCODONE HYDROCHLORIDE TABLETS *PERCOCET-5*
EACH TABLET CONTAINS:
ACETAMINOPHEN 325 MG
OXYCODONE HYDROCHLORIDE 5 MG
NOTE TYLENOL IS AVAILABLE FROM THE CORNER DRUG STORE (OTC ITEM).
ACETAMINOPHEN ELIXIR IS PREPACKED IN 120 ML BOTTLE.
TYLENOL WITH CODEINE IS AVAILABLE IN 25 REVERSE NUMBERED BLISTER PACKS
IN A TAMPER PROOF CONTAINER.
PERCOCET-5 IS A SCHEDULE II CONTROLLED MEDICATION.
ACETAMINOPHEN / CODEINE ELIXIR IS A SCHEDULE V CONTROLLED MEDICATION.
TYLENOL WITH CODEINE NO. 3 IS A SCHEDULE III CONTROLLED MEDICATION.
MAXIMUM QUANTITY FOR SCHEDULE III, IV, AND V CONTROLLED SUBSTANCES
IS A 30 DAY SUPPLY.
PRESCRIPTIONS FOR CONTROLLED SUBSTANCES ARE NOT REFILLABLE.
ACETYLCYSTEINE IS THE ANTIDOTE OF CHOICE.
CAUTIONS ACETAMINOPHEN MAY CAUSE HEPATIC DAMAGE FROM LARGE DOSES.
INTERACTION *** THE FOLLOWING INTERACTIONS ARE FOR PERCOGESIC***
WITH ANTICHOLINERGICS: ADDITIVE ANTICHOLINERGIC EFFECT.
WITH ANTIDEPRESSANTS, TRICYCLIC: ADDITIVE ANTICHOLINERGIC EFFECT.
WITH CNS DEPRESSANTS: POTENTIATES SEDATION.
WITH PHENOTHIAZINES: ADDITIVE ANTICHOLINERGIC EFFECT.

TRADE NAME DIAMOX
CATEGORY 52:10 CARBONIC ANHYDRASE INHIBITORS
REGIMEN ORAL: 5 MG PER KG OF BODY WEIGHT EVERY DAY IN MORNING.
ORAL: 500 MG TO 1000 MG DAILY IN DIVIDED DOSES.
DOSAGE FORM ACETAZOLAMIDE TABLETS USP 250 MG
INTERACTION WITH AMPHETAMINES: CARBONIC ANHYDRASE INHIBITORS ALKALINIZE URINE AND INTERFERE WITH AMPHETAMINE EXCRETION TO PROLONG ACTION OF SAME.

ACETEST - SEE NITROPRUSSIDE SODIUM AND/OR URINE CONTENTS DIAGNOSTIC

ACETIC ACID USP
TRADE NAME ACETIC ACID SOLUTION
ACI-JEL
DOMEBORO OTIC
CATEGORY 40:36 IRRIGATING SOLUTIONS
52:36 EENT UNCLASSIFIED AGENT
84:36 SKIN AND MUCOUS MEMBRANE MISCELLANEOUS AGENTS
REGIMEN OTIC: FOR TREATING EXTERNAL AUDITORY CANAL SUPERFICIAL INFECTIONS.
OTIC: INSERT SATURATED WICK - KEEP MOIST FOR 24 HOURS. REMOVE WICK AND INSTILL 5 DROPS THREE OR FOUR TIMES A DAY.
ONE APPLICATORFUL INTRAVAGINALLY IN MORNING AND EVENING (ACIJEL)
DOSAGE FORM ACETIC ACID 2% OTIC SOLUTION, 60 ML, BUFFERED TO PH 5 WITH ALUMINUM ACETATE *DOMEBORO OTIC*
ACETIC ACID COMPOUND VAGINAL JELLY 85 GM TUBE *ACI-JEL*
TUBE WITH VAGINAL APPLICATOR
EACH TUBE CONTAINS:

ACETIC ACID	0.92 %
RICINOLEIC ACID	0.70 %
OXYQUINOLINE SULFATE	0.025 %
BORIC ACID	3.0 %
GLYCERIN	5.0 %

IN A VEGETABLE GUM BASE.

ACETOHEXAMIDE
TRADE NAME DYMELOR
CATEGORY 68:20 ANTI-DIABETIC AGENT
REGIMEN ORAL: 250 MG TO 1.5 GM DAILY.
DOSAGE FORM ACETOHEXAMIDE TABLETS 500 MG
INTERACTION WITH BISHYDROXY-COUMARIN: INHIBITS METABOLISM TO INCREASE SERUM LEVELS AND MAY CAUSE HYPOGLYCEMIC REACTIONS.
WITH CHLORAMPHENICOL: CAN PROLONG HALF-LIFE TO CAUSE HYPOGLYCEMIC REACTION.
WITH CHLORTHALIDONE: ELEVATE BLOOD GLUCOSE LEVELS AND ANTAGONIZE HYPOGLYCEMIC EFFECT.
WITH ETHACRYNIC ACID: ELEVATE BLOOD GLUCOSE LEVELS AND ANTAGONIZE HYPOGLYCEMIC EFFECT.
WITH FUROSEMIDE: ELEVATE BLOOD GLUCOSE LEVELS AND ANTAGONIZE HYPOGLYCEMIC EFFECT.
WITH PHENYLBUTAZONE: INCREASED SERUM LEVELS MAY DISPLACE ACETOHEXAMIDE TO RESULT IN HYPOGLYCEMIA.
WITH SULFONAMIDES: POSSIBLE HYPOGLYCEMIA.
WITH THIAZIDE DIURETICS: ELEVATE BLOOD GLUCOSE LEVELS AND ANTAGONIZE

-CONTINUED- ACETOHEXAMIDE
HYPOGLYCEMIC EFFECT.

ACETONE TEST TABLETS - SEE NITROPRUSSIDE SODIUM

ACETYLCYSTEINE
TRADE NAME MUCOMYST
RESPAIRE
CATEGORY 48:00 EXPECTORANTS AND COUGH PREPARATIONS (MUCOLYTIC AGENT)
REGIMEN NEBULIZATION, 3 TO 5 ML OF 20% SOLUTION 3 OR 4 TIMES DAILY.
DIRECT INSTILLATION: 1 ML TO 2 ML OF 10 TO 20% SOLUTION EVERY HOUR.
INTRATRACHEAL INSTILLATION, 1 TO 2 ML OF 10 TO 20% SOLUTION EVERY HOUR TO EVERY 4 HOURS.
DOSAGE FORM ACETYLCYSTEINE SOLUTION 20%, 200 MG PER ML, 30 ML VIAL
NOTE FOR USE IN ACETAMINOPHEN OVERDOSE TOXICITY.

ACETYLSALICYLIC ACID - SEE ASPIRIN

ACHROMYCIN - SEE TETRACYCLINE

ACIJEL - SEE ACETIC ACID

ACTIFED - SEE TRIPROLIDINE AND/OR PSEUDOEPHEDRINE

ADAPIN - SEE DOXEPIN

ADRENOCORTICOTROPIN - SEE CORTICOTROPIN

ADRIAMYCIN - SEE DOXORUBICIN

ALBUMIN HUMAN
TRADE NAME BUMINATE
CATEGORY 16:00 BLOOD DERIVATIVE
REGIMEN 2.2 ML PER KG BODY WEIGHT, IV
SEE PACKAGE INSERT.
ALL NORMAL HUMAN SERUM ALBUMIN CONTAINS 130 TO 160 MEQ OF SODIUM/LITER IF MANUFACTURED AFTER 28FEB1978.
DOSAGE FORM ALBUMIN HUMAN 25%, 100 ML
NOTE ORDER ML TO BE ADMINISTERED.
STOCKED IN PHARMACY ONLY.

ALBUTEROL
TRADE NAME PROVENTIL
CATEGORY 12:12 SYMPATHOMIMETIC - ADRENERGIC AGENT
REGIMEN USUAL ADULT DOSE: TWO INHALATIONS EVERY FOUR TO SIX HOURS. NOT TO EXCEED 12 INHALATIONS PER DAY.
NOT RECOMMENDED FOR CHILDREN UNDER 12 YEARS OF AGE.
DOSAGE FORM ALBUTEROL INHALER, 17 GM (200 INHALATION DISPENSER)*PROVENTIL*VENTOLIN* EACH ACTUATION DELIVERS 90 MCG OF ALBUTEROL.
NOTE AUTHORIZED FOR PATIENTS UNABLE TO TOLERATE METAPROTERENOL INHALER ONLY.
CAUTIONS ADVERSE REACTIONS ARE DOSE RELATED AND CHARACTERISTIC OF SYMPATHOMIMETIC AGENTS.
INTERACTION WITH MAO INHIBITORS OR TRICYCLIC ANTIDEPRESSANTS: MAY POTENTIATE THE ACTION OF ALBUTEROL ON THE VASCULAR SYSTEM.
WITH BETA-RECEPTOR BLOCKING AGENTS: WILL INHIBIT EFFECTS OF EACH OTHER.

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ALCOHOL  USP
     TRADE NAME  ETHANOL
                 ETHYL ALCOHOL
     CATEGORY    28:08 ANALGESICS AND ANTIPYRETICS
                 36:36 GASTRIC FUNCTION
                 96:00 PHARMACEUTICAL AIDS
     DOSAGE FORM ALCOHOL USP 95%-NOT FOR OUTPATIENT USE
                 ALCOHOL DENATURED - FOR CLINIC USE ONLY.
     NOTE        ALCOHOL IS A SCHEDULE II CONTROLLED ITEM.

ALCOHOL, ISOPROPYL
     CATEGORY    84:04.16 SKIN AND MUCOUS MEMBRANE MISCELLANEOUS LOCAL ANTI-INFECTIVE
     DOSAGE FORM ALCOHOL, ISOPROPYL 70%

ALDACTONE - SEE SPIRONOLACTONE

ALDOMET - SEE METHYLDOPA
                                   CARBOXYMETHYLCELLULOSE (AS PRETTS)

ALLANTOIN
     TRADE NAME  AVC VAGINAL CREAM
     DOSAGE FORM ALLANTOIN 2.0%, AMINACRINE 0.2%, SULFANILAMIDE 15% VAGINAL CREAM
                 120 GM TUBE (APPROXIMATELY 20 APPLICATORFULS) *AVC VAGINAL CREAM*

ALLBEE-C - SEE VITAMIN B COMPLEX

ALLERGY EXTRACTS - AVAILABLE FROM IMMUNIZATION CLINIC
                   (BY SPECIAL CONSULTATION WITH FAMILY PRACTICE CLINIC)

ALLOPURINOL
     TRADE NAME  ZYLOPRIM
     CATEGORY    92:00 UNCLASSIFIED THERAPEUTIC AGENTS (REDUCE URIC ACID FORMATION)
     REGIMEN     INITIAL: 100-600 MG EVERY DAY.
                 MAINTENANCE: 300 MG DAILY.
                 NOTE: DOSAGE NOT TO EXCEED A MAXIMUM DAILY DOSE OF 800 MG.
     DOSAGE FORM ALLOPURINOL TABLETS 100 MG *LOPURIN*ZYLOPRIM*
                 ALLOPURINOL TABLETS 300 MG *LOPURIN*ZYLOPRIM*
     CAUTIONS    ALLOPURINOL MAY CAUSE EXACERBATION OF GOUT.
     INTERACTION WITH ANTICOAGULANTS, ORAL: INHIBITION OF MICROSOMAL ENZYMES MAY
                      INCREASE ANTICOAGULANT EFFECT.
                 WITH AZATHIOPRINE: INCREASED TOXICITY OF AZATHIOPRINE BECAUSE OF
                      XANTHINE OXIDASE INHIBITION.
                 WITH CYCLOPHOSPHAMIDE: INCREASED BONE MARROW DEPRESSION.
                 WITH MERCAPTOPURINE: INCREASED TOXICITY OF MERCAPTOPURINE BECAUSE
                      OF XANTHINE OXIDASE INHIBITION.
                 WITH THIOGUANINE: INCREASED THIOGUANINE TOXICITY BECAUSE OF XANTHINE
                      OXIDASE INHIBITION.

ALLYLBARBITURIC ACID - SEE ASPIRIN (AS FIORINAL)

ALPHALIN - SEE VITAMIN A

ALUMINUM ACETATE  USP
     TRADE NAME  BUROW'S OTIC
                 BUROW'S TABLETS
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-CONTINUED-      ALUMINUM ACETATE  USP
     CATEGORY    52:36 UNCLASSIFIED OTIC AGENT
                 84:12 ASTRINGENT
     REGIMEN     TOPICALLY: ASTRINGENT FOR ACUTE AND SUBACUTE INFLAMMATORY CONDITIONS.
                 OTIC: TREATMENT OF SUPERFICIAL INFECTIONS OF EXTERNAL AUDITORY CANAL.
     DOSAGE FORM ALUMINUM ACETATE COMPOUND EFFERVESCENT TABLETS
                   ONE TABLET PER PINT OF WATER MAKES 1:40 SOLUTION
                   TWO TABLETS PER PINT OF WATER MAKES 1:20 SOLUTION.
                   FOUR TABLETS PER PINT OF WATER MAKES 1:10 SOLUTION
                   ONE TABLET IN 100 ML YIELDS BUROW'S SOLUTION
                 ALUMINUM ACETATE WITH ACETIC ACID 2% *DOMEBORO OTIC*
     NOTE        ALUMINUM ACETATE TABLETS ARE PREPACKED IN 20'S.
                 DOMEBORO OTIC SOLUTION - SEE ACETIC ACID

ALUMINUM HYDROXIDE
     TRADE NAME  AMPHOJEL
                 GAVISCON
                 MAALOX
                 MYLANTA II
     CATEGORY    56:04 ANTACIDS AND ADSORBENTS
     REGIMEN     8-15 ML EVERY 2 TO 4 HOURS WHEN NEEDED.
     DOSAGE FORM ALUMINUM HYDROXIDE GEL USP, 360 ML *AMPHOJEL*
                   EACH 5 ML CONTAINS:
                     ALUMINUM HYDROXIDE          320 MG
                 ALUMINUM HYDROXIDE GEL WITH MAGNESIUM HYDROXIDE *MAALOX SUSPENSION*
                   180 ML BOTTLE
                     EACH 5 ML CONTAINS:
                 ALUMINUM HYDROXIDE COMPOUND WITH ALGINIC ACID TABLETS  *GAVISCON*
                   EACH TABLET CONTAINS:
                     ALUMINUM HYDROXIDE GEL          80 MG
                     MAGNESIUM TRISILICATE           20 MG
                     SODIUM BICARBONATE              70 MG
                     ALGINIC ACID                   200 MG
                 ALUMINUM HYDROXIDE GEL, MAGNESIUM HYDROXIDE AND SIMETHICONE  *MYLANTA*
                   EACH TABLET CONTAINS:
                     ALUMINUM HYDROXIDE          200 MG
                     MAGNESIUM HYDROXIDE         200 MG
                     SIMETHICONE                  20 MG
                 ALUMINUM HYDROXIDE GEL, MAGNESIUM HYDROXIDE AND SIMETHICONE          *
                   *MYLANTA-II, GELUSIL II*
                     EACH TABLET CONTAINS:                          60 TABLETS PER BOX
                     EACH 5 ML CONTAINS:                           150 ML BOTTLE
                       ALUMINUM HYDROXIDE          400 MG
                       MAGNESIUM HYDROXIDE         400 MG
                       SIMETHICONE                  30 MG
                 ALUMINUM HYDROXIDE GEL *APT*  (DISCONTINUED BY MANUFACTURER)
                   EACH 5 ML CONTAINS:
                     ALUMINUM HYDROXIDE          305 MG
                     MAGNESIUM TRISILICATE       625 MG
     NOTE        GAVISCON IS AUTHORIZED FOR TREATMENT OF HEARTBURN DUE TO REFLUX OF
                   STOMACH CONTENTS ASSOCIATED WITH HIATAL HERNIA AND DUODENAL ULCER.
                 MYLANTA/MYLANTA II ARE LOW SODIUM ANTACIDS.
                 GAVISCON TABLETS ARE PREPACKED IN 100'S.
                 MAXIMUM QUANTITY AUTHORIZED FOR MAALOX SUSPENSION IS 10 BOTTLES
                   WITH FIVE REFILLS.
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-CONTINUED- ALUMINUM HYDROXIDE
MAXIMUM QUANTITY AUTHORIZED FOR MYLANTA II SUSPENSION IS 5 BOTTLES WITH FIVE REFILLS.
MAALOX WILL BUFFER 2.50 MEQ OF HCL PER ML.
MYLANTA II WILL BUFFER 5.1 MEQ OF HCL PER ML.
AMPHOGEL IS PREPACKED IN 360 ML BOTTLES.
MYLANTA TABLETS ARE PREPACKED IN 100'S.
INTERACTION WITH TETRACYCLINES: DECREASED TETRACYCLINE ACTIVITY DUE TO DIVALENT AND TRIVALENT CHELATION.
WITH SULFONAMIDES: DECREASED SULFONAMIDE ACTIVITY DUE TO DECREASED ABSORPTION IN ALKALINE PH.

ALUPENT - SEE METAPROTERENOL SULFATE

AMESEC - SEE AMINOPHYLLINE

AMETHOPTERIN - SEE METHOTREXATE

AMINO ACID DIETARY SUPPLEMENTS - SEE DIETARY SUPPLEMENTS

AMINO ACIDS
TRADE NAME HYPERALIMENTATION
TOTAL PARENTERAL NUTRITION
CATEGORY 40:20 CALORIC AGENT
DOSAGE FORM AMINO ACID 2.75% IN DEXTROSE 25%, 1000 ML

AMINO ACID, CRYSTALLINE
TRADE NAME FREAMINE II
CATEGORY 40:20 CALORIC AGENT
REGIMEN VARIES WITH PATIENT AND CONDITIONS.
DOSAGE FORM AMINO ACID, CRYSTALLINE KIT *FREAMINE II*
EACH KIT CONTAINS:
AMINO ACID 8.5% 500 ML
DEXTROSE 50% 500 ML IN A 1000 ML BOTTLE
PROTEIN HYDROLYSATE CONSISTING OF: L-LEUCINE, L-METHIONINE, L-ISOLEUCINE, L-PHENYLALANINE, L-TYROSINE, ADDED METHIONINE, CYSTEINE AND BENZETONIUM CHLORIDE.

AMINOPHYLLINE USP
CATEGORY 86:00 SPASMOLYTIC AGENT
REGIMEN NOTE: **PEDIATRIC DOSES ARE GIVEN EVERY 8 TO 12 HOURS**
DOSAGE FORM AMINOPHYLLINE TABLETS 200 MG
AMINOPHYLLINE IV INJECTION USP 25 MG PER ML, 10 ML AMPUL

AMITRIPTYLINE HYDROCHLORIDE
TRADE NAME ELAVIL
ENDEP
CATEGORY 28:16.04 ANTI-DEPRESSANT
REGIMEN 75 TO 150 MG DAILY IN DIVIDED DOSES, ORALLY.
IM, INITIALLY, 20 TO 30 MG FOUR TIMES A DAY.
IM, MAINTENANCE DOSE - 40 TO 100 MG PER DAY.
(ANTIDEPRESSANT EVEN WHEN ASSOCIATED WITH TENSION AND ANXIETY)
150-300 MG EVERY DAY, FOR NON-AMBULATORY HOSPITALIZED PATIENTS.
DOSAGE FORM AMITRIPTYLINE TABLETS 25 MG
NOTE MAXIMUM QUANTITY AUTHORIZED IS A 30 DAY SUPPLY.

-CONTINUED- AMITRIPTYLINE HYDROCHLORIDE
A MAXIMUM OF FIVE REFILLS ARE AUTHORIZED ON AMITRYPTYLINE 25 MG TABLETS
IT HAS BEEN REPORTED THAT THE IV ADMINISTRATION OF 1 TO 3 MG OF PHYSOSTIGMINE SALICYLATE (ANTILIRIUM) WILL REVERSE THE ANTICHOLINERGIC SYMPTOMS OF AMITRIPTYLINE POISONING.
INTERACTION WITH BARBITURATES: INDUCTION OF MICROSOMAL ENZYMES TO DECREASE ANTIDEPRESSANT EFFECT.
WITH GUANETHIDINE: TARGET SITE BLOCKAGE ANTAGONIZES ANTIHYPERTENSIVE EFFECT TO INCREASE HYPERTENSION.
WITH MAOI'S: POSSIBLE HYPERPYREXIA, CONVULSIONS.
WITH SYMPATHOMIMETIC AMINES: INHIBITION OF NOREPINEPHRINE UPTAKE BY NEURON CAN PRODUCE HYPERTENSIVE CRISIS.

AMOXICILLIN
TRADE NAME AMOXIL
LAROTID
POLYMOX
CATEGORY 8:12.16 PENICILLINS (SEMISYNTHETIC - ACTION SIMILAR TO AMPICILLIN)
REGIMEN ADULT- 250-500 MG EVERY EIGHT HOURS.
PEDIATRIC: 9-20 KG-20-40 MG PER KG PER DAY IN THREE DIVIDED DOSES.
6 TO 8 KG- 50 MG EVERY 8 HOURS, UNDER 6 KG- 25 MG EVERY 8 HOURS.
DOSAGE FORM AMOXICILLIN ORAL SUSPENSION 250 MG PER 5 ML, 150 ML *AMOXIL*
AMOXICILLIN ORAL SUSPENSION 125 MG PER 5 ML, 150 ML
CAUTIONS NOT TO BE USED FOR PATIENTS SHOWING SENSITIVITY TO AMPICILLIN.
NOTE AMOXICILLIN 125 MG EVERY 8 HOURS IS THERAPEUTICALLY EQUIVALENT TO AMPICILLIN 250 MG EVERY 6 HOURS.
AMOXICILLIN REQUIRES ONLY THREE TIMES A DAY DOSAGE AND GIVES HIGHER BLOOD LEVELS THAN AMPICILLIN WITH A REDUCED INCIDENCE OF DIARRHEA AND RASHES.

AMOXIL - SEE AMOXICILLIN

AMPHOJEL - SEE ALUMINUM HYDROXIDE

AMPICILLIN
TRADE NAME OMNIPEN
PENBRITIN
POLYCILLIN
PRINCIPEN
TOTACILLIN
CATEGORY 8:12.16 PENICILLINS
REGIMEN 250 TO 500 MG EVERY 6 HOURS
TAKE ON AN EMPTY STOMACH.
DOSAGE FORM AMPICILLIN CAPSULES 250 MG
AMPICILLIN INJECTION 1 GM
NOTE USE OF INJECTION IS AUTHORIZED FOR HOSPITAL USE ONLY.
CAUTIONS AMPICILLIN HIGHER INCIDENCE OF DIARRHEA AND RASH THAN OTHER PENICILLINS
AMPICILLIN SHOWS INCIDENCE OF ALLERGIC REACTIONS (APPROX 10%) HIGHER
INTERACTION WITH PROBENECID: PROLONGS BLOOD LEVELS OF PENICILLINS.

AMYL NITRITE NF
TRADE NAME AMYL NITRITE ASPEROLS
CATEGORY 24:12 VASODILATING AGENT
REGIMEN ACTS WITHIN ONE-HALF TO ONE MINUTE AND LASTS THREE TO FIVE MINUTES.
(USED FOR RELIEF OF ANGINA PECTORIS)

-CONTINUED- AMYL NITRITE NF
DOSAGE FORM AMYL NITRITE NF 0.3 ML ASPEROL
NOTE REFRIGERATED ITEM.

ANALGESIC ORAL PROTECTIVE - SEE ORAL PROTECTIVE BASE

ANCEF - SEE CEFAZOLIN SODIUM

ANECTINE - SEE SUCCINYLCHOLINE CHLORIDE

ANTIMINTH - SEE PYRANTEL PAMOATE

ANTIPYRINE NF
TRADE NAME AURALGAN
CATEGORY 92:36 FENT LOCAL ANESTHETIC (OTIC ANTI-INFECTIVE AND ANALGESIC)
REGIMEN FILL EAR CANAL WITH MOISTENED COTTON PLEDGET THREE TO FOUR TIMES A DAY.
DOSAGE FORM ANTIPYRINE OTIC SOLUTION 15 ML BOTTLE WITH DROPPER *
EACH ML CONTAINS:
ANTIPYRINE 54 MG
BENZOCAINE 14 MG
GLYCERIN Q.S. AD 15 ML

ANTI-RABIES SERUM
CATEGORY 80:04 SERUMS
REGIMEN AVERAGE FOR ANTIRABIES SERUM EQUINE- 55 UNITS PER KG OF BODY WEIGHT.
IF A SEVERE HEAD OR NECK WOUND - 120 UNITS PER KG.
IF WOUND OLDER THAN 24 HOURS - 120 UNITS PER KG.
DOSAGE FORM ANTI-RABIES SERUM, EQUINE ORIGIN 1000 UNITS PER 10 ML VIAL.
RABIES ANTIGEN 2.5 I.U. WISTER RABIES VIRUS
NOTE HYPERAB - SEE RABIES IMMUNE GLOBULIN (HUMAN)
ITEM MUST BE REFRIGERATED
ITEM OBTAINED FROM PUBLIC HEALTH SERVICE.

ANTISNAKE SERUM - SEE CROTALINE ANTIVENIN

ANTIVERT - SEE MECLIZINE

ANUSOL HEMORRHOIDAL SUPPOSITORIES - SEE BISMUTH COMPOUND

ANUSOL HC HEMORRHOIDAL SUPPOSITORIES - SEE BISMUTH COMPOUND

APRESOLINE - SEE HYDRALAZINE

AQUA MEPHYTON - SEE PHYTONADIONE

ARALEN - SEE CHLOROQUINE PHOSPHATE

ARISTOCORT - SEE TRIAMCINOLONE

ARISTOCORT A - SEE TRIAMCINOLONE

ARISTOCORT FORTE - SEE TRIAMCINOLONE

ARISTOSPAN - SEE TRIAMCINOLONE

ARTANE - SEE TRIHEXYPHENIDYL HYDROCHLORIDE

ARTIFICIAL TEARS - SEE POLYVINYLPYRROLIDONE

ASA - SEE ASPIRIN

ASCORBIC ACID USP
TRADE NAME VITAMIN C
CATEGORY 88:12 VITAMIN C
REGIMEN THERAPEUTIC- 100-200 MG EVERY DAY, PROTECTIVE DOSE- 25 MG DAILY.
PEDIATRIC- THERAPEUTIC, 35-50 MG EVERY DAY; PROTECTIVE- 10 MG DAILY.
NOTE: HIGHER DOSES ARE PRESCRIBED AS NEEDED.
URINE ACIDIFIER, ADULT DOSE 4 TO 12 GRAMS DAILY IN DIVIDED DOSES.
DOSAGE FORM ASCORBIC ACID TABLETS USP 500 MG

ASPIRIN USP
TRADE NAME ACETYLSALICYLIC ACID
ASA
ECOTRIN
BAYER
BABY ASPIRIN
CATEGORY 20:08.04 NONSTEROIDAL ANTI-INFLAMMATORY AGENTS
REGIMEN INFANTS, 65 TO 75 MG EVERY 4 HOURS.
INFANTS AND CHILDREN: ANTIPYRETIC, 65 MG PER KG EVERY 24 HOURS.
CHILDREN FROM 1 TO 12 YEARS OF AGE, 65 TO 325 MG EVERY 4 HOURS.
MAXIMUM OF 3.6 GM EVERY 24 HOURS DIVIDED INTO 4 TO 6 DOSES.
ADULTS, 325 TO 650 MG EVERY 4 HOURS.
DOSAGE FORM ASPIRIN TABLETS 81 MG *BABY ASPIRIN*CHILDRENS ASPIRIN*
ASPIRIN TABLETS USP 325 MG *
ASPIRIN TABLETS, ENTERIC COATED 325 MG *EC-ASA*ECOTRIN*
ASPIRIN SUPPOSITORIES 65 MG, 12'S
ASPIRIN SUPPOSITORIES USP 325 MG
NOTE BABY ASPIRIN IS PREPACKED IN 36 TABLET PACKAGES.

ATROMID-S - SEE CLOFIBRATE

ATROPINE SULFATE (SYSTEMIC)
CATEGORY 12:08 PARASYMPATHOLYTIC -CHOLINERGIC BLOCKING- AGENT
REGIMEN IV OR SC - 500 MCG
PARENTERAL, ADULT, SC, IM, OR IV - 0.3 MG TO 0.6 MG EVERY 4 TO 6 HOURS.
PEDIATRIC: 120 MCG TO 180 MCG.
MAY BE INCREASED BY 20 MCG PER YEAR OF AGE TO A MAXIMUM OF 300 MCG.
(CYCLOPEGIC AGENT-RELAXES BRONCHIAL SPASMS AND SUPPRESSES SECRETIONS)
DOSAGE FORM ATROPINE SULFATE 0.1 MG PER ML, 5 ML READY TO USE SYRINGE
ATROPINE SULFATE INJECTION 0.4 MG PER ML, 20 ML *

ATROPINE SULFATE (OPHTHALMIC)
CATEGORY 52:24 MYDRIATIC
DOSAGE FORM ATROPINE SULFATE OPHTH. SOLN 1%, 15 ML *ATROPISOL*ISOPTO-ATROPINE*

AUROTHIOGLUCOSE USP

-CONTINUED- AUROTHIOGLUCOSE SP
TRADE NAME SOLGANAL
CATEGORY 80:00 GOLD COMPOUNDS
REGIMEN I.M.: 10 MG THE FIRST WEEK, THEN 25 MG WEEKLY THE 2ND AND 3RD WEEKS.
THEN 50 MG WEEKLY NOT TO EXCEED 800-1000 MG FOR TOTAL TREATMENT.
DOSAGE FORM AUROTHIOGLUCOSE INJECTION USP 50 MG PER ML, 10 ML VIAL
SOLGANAL INJECTION CONTAINS 50% GOLD
WITH ALUMINUM MONOSTEARATE USP 2%
CAUTIONS AUROTHIOGLUCOSE MAY CAUSE TOXIC NEPHRITIS.
NOTE 50% GOLD PREPARATION FOR PATIENTS SENSITIVE TO MYOCHRYSINE.
USE IS AUTHORIZED FOR HOSPITAL USE.

AVC - SEE ALLANTOIN AND/OR SULFANILAMIDE

AVEENO - SEE OATMEAL, COLLOIDAL

AVENTYL - SEE NORTRIPTYLINE HYDROCHLORIDE

AVLOSULFON - SEE DAPSONE

AZOLID - SEE PHENYLBUTAZONE

AZULFIDINE - SEE SULFASALAZINE

BABY ASPIRIN - SEE ASPIRIN USP

BACID - SEE LACTOBACILLUS ACIDOPHILUS

BACIGUENT - SEE BACITRACIN

BACIMYCIN - SEE BACITRACIN

BACITRACIN (TOPICAL)
TRADE NAME BACIGUENT
CATEGORY 84:04.04 SKIN AND MUCOUS MEMBRANE ANTIBIOTIC
REGIMEN OINTMENT FOR TOPICAL USE ONLY.
DOSAGE FORM BACITRACIN OINTMENT USP 500 UNITS PER GRAM, 15 GM *BACIGUENT*
BACITRACIN 500 UNITS WITH NEOMYCIN SULFATE 5 MG PER GRAM OF OINTMENT
(EQUIVALENT TO 3.5 MG OF NEOMYCIN BASE PER GRAM) 15 GM *BACIMYCIN*

BACTRIM - SEE TRIMETHOPRIM AND/OR SULFAMETHOXAZOLE

BACTRIM DS - SEE TRIMETHOPRIM AND/OR SULFAMETHOXAZOLE

BAYAPAP - SEE ACETAMINOPHEN

BAYER - SEE ASPIRIN

BECLOMETHASONE
TRADE NAME BECLOVENT
BECONASE
VANCENASE
VANCERIL
CATEGORY 92:08 ANTI-INFLAMMATORY AGENTS
68:04 ADRENALS

-CONTINUED- BECLOMETHASONE
REGIMEN ADULT: TWO ORAL INHALATIONS 3 TO 4 TIMES A DAY.
NOT TO EXCEED 20 ORAL INHALATIONS A DAY.
CHILDREN (6 TO 12 YEARS): 1 TO 2 ORAL INHALATIONS 3 OR 4 TIMES A DAY.
NOT TO EXCEED 10 ORAL INHALATIONS A DAY.
NOTE: MAY BE INEFFECTIVE IN CHILDREN BELOW 6 YEARS OF AGE.
CHILDREN UNDER 12 YEARS (OR): NASAL INHALATION IS NOT RECOMMENDED.
DOSAGE FORM BECLOMETHASONE DIPROPIONATE METERED DOSE INHALER *BECLOVENT*VANCERIL* *
EACH ORAL INHALER DELIVERS APPROX. 200 DOSES OF 42 MCG PER DOSE
BECLOMETHASONE DIPROPIONATE METERED DOSE NASAL INHALER *BECONASE*
NASAL INHALER CONTAINS APPROXIMATELY 200 DOSES OF 42 MCG. *VANCENASE*
CAUTIONS PATIENTS MAY NEED SUPPLEMENTARY SYSTEMIC STEROIDS DURING PERIODS OF
STRESS OR A SEVERE ASTHMA ATTACK.

BECLOVENT - SEE BECLOMETHASONE

BECONASE - SEE BECLOMETHASONE

BELLADONNA
TRADE NAME BELLADONNA TINCTURE
CATEGORY 12:08 PARASYMPATHOLYTIC -CHOLINERGIC BLOCKING- AGENT
REGIMEN TINCTURE, 0.6 ML 3 TIMES DAILY WITH A RANGE OF 0.3-1 ML
DOSAGE FORM BELLADONNA TINCTURE USP
TINCTURE CONTAINS 0.3 MG ALKALOIDS PER ML
CAUTIONS TINCTURE OF BELLADONNA IS A HIGHLY POISONOUS CONCENTRATED FORM OF
BELLADONNA ALKALOIDS.

BELLADONNA AND PHENOBARBITAL
TRADE NAME BELLERGAL-S
DONNATAL
CATEGORY 12:08 PARASYMPATHOLYTIC -CHOLINERGIC BLOCKING- AGENT
REGIMEN DONNATAL- 1 TABLET 3-8 TIMES DAILY.
DONNATAL ELIXIR- 15-40 ML DAILY.
BELLERGAL-S - 1 TABLET TWICE DAILY.
(USED FOR SPASTIC STATES OF GI TRACT AND URINARY BLADDER)
DOSAGE FORM BELLADONNA ALKALOIDS AND PHENOBARBITAL TABLETS *DONNATAL*KINESED*
EACH TABLET CONTAINS:
HYOSCYAMINE SULFATE 100 MCG
ATROPINE SULFATE 20 MCG
SCOPOLAMINE HBR 7 MCG
PHENOBARBITAL 16 MG
BELLADONNA ALKALOIDS AND PHENOBARBITAL ELIXIR *DONNATAL*
EACH 5 ML CONTAINS:
HYOSCYAMINE SULFATE 100 MCG
ATROPINE SULFATE 20 MCG
HYOSCINE HYDROBROMIDE 7 MCG
PHENOBARBITAL 16 MG
BELLADONNA, PHENOBARBITAL AND ERGOTAMINE TARTRATE
SUSTAINED ACTION TABLETS *BELLERGAL-S*ERGOTAL*
EACH TABLET CONTAINS:
BELLADONNA ALKALOIDS AS MALEATES 200 MCG
ERGOTAMINE TARTRATE 600 MCG
PHENOBARBITAL 40 MG
NOTE LIQUIDS ARE PREPACKED IN 120 ML BOTTLES.

BENADRYL - SEE DIPHENHYDRAMINE HYDROCHLORIDE

BENEMID - SEE PROBENECID

BENOXYL - SEE BENZOYL PEROXIDE

BENTYL - SEE DICYCLOMINE HYDROCHLORIDE

BENZAGEL - SEE BENZOYL PEROXIDE

BENZATHINE PENICILLIN G - SEE PENICILLIN G, BENZATHINE

BENZENE HEXACHLORIDE, GAMMA USP
TRADE NAME KWELL
CATEGORY 84:04.12 SKIN AND MUCOUS MEMBRANE SCABICIDE AND PEDICULICIDE
REGIMEN TOPICAL, CREAM 1%, USUALLY NOT MORE THAN 30 GM IS APPLIED TO INVOLVED AREAS OF SKIN OR HAIR. APPLY LIBERALLY TO AREA AFTER THOROUGH CLEANSING. REPEAT IN 24 HOURS, IF NECESSARY, BUT NOT MORE THAN TWICE IN ONE WEEK.
DOSAGE FORM GAMMA BENZENE HEXACHLORIDE CREAM USP 1%, 60 GM
GAMMA BENZENE HEXACHLORIDE SHAMPOO 1%, 60 ML
CAUTIONS CARE SHOULD BE TAKEN WHEN USED IN TREATING PEDIATRIC CASES.

BENZOCAINE
TRADE NAME CETACAINE
CATEGORY 52:16 EENT LOCAL ANESTHETIC
84:08 SKIN AND MUCOUS MEMBRANE ANTIPRURITIC AND LOCAL ANESTHETIC
REGIMEN TOPICALLY AS DIRECTED
DOSAGE FORM BENZOCAINE AEROSOL, 56 ML *CETACAINE*
CONTAINS:

BENZOCAINE	14.0%
BUTYL AMINOBENZOATE	2.0%
TETRACAINE HYDROCHLORIDE	2.0%
BENZALKONIUM CHLORIDE	0.5%

NOTE ESTER TYPE LOCAL ANESTHETIC AGENT.

BENZOCAINE IN ORABASE - SEE DENTAL PROTECTIVE PASTE

BENZOIN USP
CATEGORY 84:26.12 SKIN AND MUCOUS MEMBRANE PROTECTANT
REGIMEN NIPPLES / CRACKED NIPPLES: MIX WITH EQUAL PARTS OF GLYCERIN AND WATER.
INHALATION / EXPECTORANTS: ONE TEASPOONFUL IN HOT WATER AS INHALANT.
DOSAGE FORM BENZOIN TINCTURE
BENZOIN TINCTURE, 473 ML

BENZONATATE
TRADE NAME TESSALON
CATEGORY 48:00 EXPECTORANT AND COUGH PREPARATION
REGIMEN ADULT AND CHILDREN OVER TEN YEARS OLD: 100 MG THREE TIMES DAILY. IF NECESSARY UP TO 600 MG MAY BE GIVEN.
DOSAGE FORM BENZONATATE CAPSULES 100 MG *TESSALON*

NOTE CAPSULES MUST BE SWALLOWED WHOLE AND NOT CHEWED.

BENZOYL PEROXIDE
TRADE NAME BENOXYL
BENZAC
BENZAC W GEL
BENZAGEL
PERSAGEL
CATEGORY 84:04.16 SKIN AND MUCOUS MEMBRANE MISC. LOCAL ANTI-INFECTIVE
36:28 KERATOLYTIC AGENT
REGIMEN AFTER WASHING, APPLY THIN FILM AND ALLOW TO DRY.
TOPICAL: APPLY TWICE DAILY TO AID IN CONTROL OF ACNE VULGARIS.
DOSAGE FORM BENZOYL PEROXIDE CREAM 5%, 45 GRAMS
BENZOYL PEROXIDE CREAM 10%

BENZTROPINE MESYLATE NF
TRADE NAME COGENTIN
CATEGORY 12:08 PARASYMPATHOLYTIC -CHOLINERGIC BLOCKING- AGENTS
REGIMEN ONE MG TO TWO MG DAILY (FOR PARKINSONISM)
DOSAGE FORM BENZTROPINE MESYLATE TABLETS NF 2 MG

BENZYL PENICILLIN POTASSIUM - SEE PENICILLIN G, POTASSIUM

BENZYL PENICILLIN SODIUM - SEE PENICILLIN G, SODIUM

BENZYL PENICILLIN PROCAINE - SEE PENICILLIN G, PROCAINE USP

BETADINE - SEE POVIDONE-IODINE

BETALIN - SEE THIAMINE HYDROCHLORIDE

BETAMETHASONE (TOPICAL)
TRADE NAME VALISONE
CATEGORY 84:06 SKIN AND MUCOUS MEMBRANE ANTI-INFLAMMATORY AGENT
REGIMEN TOPICALLY: APPLY ONE TO FOUR TIMES DAILY.
DOSAGE FORM BETAMETHASONE VALERATE CREAM 0.1%, 15 GM
BETAMETHASONE VALERATE CREAM 0.1%, 45 GM *VALISONE*

BETAPEN VK - SEE PENICILLIN V

BETHANECHOL CHLORIDE USP
TRADE NAME DUVOID
MYOCHOLINE
MYOTONACHOL
URECHOLINE
CATEGORY 12:04 PARASYMPATHOMIMETIC-CHOLINERGIC-AGENT
REGIMEN ORAL, 10 MG THREE TIMES A DAY.
PARENTERAL, 2.5 MG SUBCUTANEOUSLY
DOSAGE FORM BETHANECHOL CHLORIDE TABLETS 10 MG
BETHANECHOL CHLORIDE TABLETS 25 MG
BETHANECHOL CHLORIDE INJECTION USP 5 MG PER ML, 1 ML AMPUL
NOTE INJECTION IS FOR SUBCUTANEOUS USE ONLY.

BICILLIN - SEE PENICILLIN G, BENZATHINE

BICILLIN CR - SEE PENICILLIN G BENZATHINE AND PENICILLIN G PROCAINE

BICILLIN CR 900/300 - SEE PENICILLIN G BENZATHINE AND PEN G PROCAINE

BICILLIN LA - SEE PENICILLIN G, BENZATHINE

BICITRA - SEE SODIUM CITRATE

BIRTH CONTROL TABLETS - SEE MESTRANOL AND/OR ETHINYL ESTRADIOL COMB.

BISACODYL
TRADE NAME DULCOLAX
THERALAX
CATEGORY 56:12 CATHARTIC
REGIMEN ORAL, 2 OR 3 TABLETS AT BEDTIME
RECTAL, 1 SUPPOSITORY 1 OR 2 HOURS BEFORE OPERATIVE PROCEDURE.
DOSAGE FORM BISACODYL TABLETS, ENTERIC COATED 5 MG
BISACODYL SUPPOSITORIES 10 MG
CAUTIONS BISACODYL TABLETS MUST BE SWALLOWED WHOLE.
BISACODYL SHOULD NOT BE TAKEN WITHIN AN HOUR OF MILK OR ANTACIDS.

BLEPHAMIDE - SEE SULFACETAMIDE, SODIUM AND/OR PREDNISOLONE

BONINE - SEE MECLIZINE HYDROCHLORIDE

BRETHINE - SEE TERBUTALINE

BRETYLIUM TOSYLATE
TRADE NAME BRETYLOL
CATEGORY 24:04 CARDIAC DRUGS
REGIMEN I.V.: 5 - 10 MG PER KG BODY WEIGHT BY RAPID INJECTION OVER 8 TO 10 MIN.
DOSAGE OF BRETYLOL SHOULD BE REDUCED AND DISCONTINUED IN 3 TO 5 DAYS
UNDER ELECTRO CARDIOGRAPHIC MONITORING.
AND SUBSTITUTE WITH AN APPROPRIATE ANTIARRHYTHMIC AGENT.
DOSAGE FORM BRETYLIUM TOSYLATE INJECTION 50 MG PER ML, 10 ML AMPULE *BRETYLOL*
NOTE USE IS AUTHORIZED FOR THE EMERGENCY ROOM.
IV SOLUTION MUST BE DILUTED.
CAUTIONS HYPOTENSION AND POSTURAL HYPOTENSION ARE MOST FREQUENT ADVERSE EFFECTS.

BRETYLOL - SEE BRETYLIUM TOSYLATE

BRICANYL - SEE TERBUTALINE

BROMOCRIPTINE
TRADE NAME PARLODEL
CATEGORY 92:00 UNCLASSIFIED
REGIMEN MAINTENANCE ORAL: 2.5 MG TWO OR THREE TIMES A DAY WITH MEALS.
(TREATMENT OF AMENORRHEA, GALACTORRHEA, ASSOCIATED
WITH HYPERPROLACTINEMIA)
DOSAGE FORM BROMOCRIPTINE MESYLATE TABLETS 2.5 MG *PARLODEL*
NOTE USE IS AUTHORIZED FOR INTERNAL MEDICINE SERVICE.

BROMPHENIRAMINE MALEATE NF
TRADE NAME DIMETAPP
CATEGORY 4:00 ANTIHISTAMINES

 BROMPHENIRAMINE MALEATE NF
REGIMEN ADULT, ORAL 4-8 MG 3-6 TIMES A DAY.
PEDIATRIC, OVER 6 YRS- 2-4 MG 3-4 TIMES A DAY, 3-6 YRS- 2 MG 3 TIMES
A DAY, UNDER 3 YRS- 440 MCG PER KG OF BODY WEIGHT.
ELIXIR: ORAL, 5 ML TO 10 ML THREE TO FOUR TIMES A DAY.
EXTENDED RELEASE - ADULT, ONE TABLET TWICE A DAY (EVERY 8 TO 12 HOURS)
NOTE: ALL PEDIATRIC DOSES ARE ORAL.
DOSAGE FORM BROMPHENIRAMINE MALEATE COMPOUND EXTENDED RELEASE TABLETS *
EACH TABLET CONTAINS: *DIMETAPP EXTENTABS*
BROMPHENIRAMINE MALEATE 12 MG
PHENYLEPHRINE HYDROCHLORIDE 15 MG
PHENYLPROPANOLAMINE HYDROCHLORIDE 15 MG
BROMPHENIRAMINE MALEATE COMPOUND ELIXIR, 120 ML *DIMETAPP*TRIPHEN*
EACH 5 ML CONTAINS:
BROMPHENIRAMINE MALEATE 4.0 MG
PHENYLEPHRINE HYDROCHLORIDE 5.0 MG
PHENYLPROPANOLAMINE HYDROCHLORIDE 5.0 MG
ALCOHOL CONTENT 2.3%
NOTE DIMETAPP EXTENTAB QUANTITY IS LIMITED TO A TEN DAY SUPPLY
UNLESS *CHRONIC* IS NOTED ON THE PRESCRIPTION.
CAUTIONS BROMPHENIRAMINE MALEATE MAY CAUSE DRYNESS OF THE MOUTH, CONSTIPATION,
OR DYSURIA.
ANTIHISTAMINES MAY CAUSE DROWSINESS.
ALCOHOL SHOULD NOT BE CONSUMED WHILE TAKING ANTIHISTAMINES.
INTERACTION WITH ANTICHOLINERGICS: ADDITIVE ANTICHOLINERGIC EFFECT.
WITH ANTIDEPRESSANTS, TRICYLIC: ADDITIVE ANTICHOLINERGIC EFFECT.
WITH CNS DEPRESSANTS: POTENTIATES SEDATION.
WITH PHENOTHIAZINES: ADDITIVE ANTICHOLINERGIC EFFECT.

BRONKOSOL - SEE ISOETHARINE

BUMINATE - SEE ALBUMIN HUMAN

BUROWS - SEE ALUMINUM ACETATE

BUTALBITAL - SEE ASPIRIN AND/OR ACETAMINOPHEN (AS COMBINATION)

BUTAZOLIDIN - SEE PHENYLBUTAZONE

CAFFEINE USP
CATEGORY 28:20 RESPIRATORY AND CEREBRAL STIMULANT
REGIMEN ORAL, 60 MG TO 120 MG.
PARENTERAL, IM OR SC - 500 MG TO 1 GM.
DOSAGE FORM CAFFEINE AND SODIUM BENZOATE INJECTION USP, 125 MG PER ML, 2 ML AMPUL

CAFERGOT - SEE ERGOTAMINE TARTRATE

CAFERGOT PB - SEE ERGOTAMINE TARTRATE

CALAMINE
CATEGORY 84:24.04 SKIN AND MUCOUS MEMBRANE BASIC LOTIONS AND LINIMENTS
DOSAGE FORM CALAMINE LOTION, 120 ML

CALAN - SEE VERAPAMIL

TRADE NAME TITRALAC
CATEGORY 56:04 ANTACIDS AND ADSORBENTS
40:12 REPLACEMENT ION THERAPY
REGIMEN 1-2 GM BETWEEN MEALS
ADULT: ONE TO TWO TABLETS CHEWED ONE HOUR AFTER MEALS AS NEEDED.
DOSAGE FORM CALCIUM CARBONATE AND GLYCINE CHEWABLE TABLETS *TITRALAC*
EACH TABLET CONTAINS:
CALCIUM CARBONATE 420 MG
(168 MG CALCIUM)
GLYCINE 180 MG

CALCIUM CHLORIDE USP
CATEGORY 40:12 REPLACEMENT ION THERAPY
REGIMEN 10 ML IN HYPOCALCEMIC TETANY.
USE IV WITH CAUTION, ONE ML PER MINUTE.
DOSAGE FORM CALCIUM CHLORIDE INJECTION 100 MG PER ML, 10 ML
CALCIUM CHLORIDE INJECTION 10%, SYRINGE-NEEDLE UNIT
10 ML -BRISTOJECT OR EQUIVALENT-

CALCIUM GLUBIONATE
TRADE NAME NEO-CALGLUCON
CATEGORY 40:12 REPLACEMENT ION THERAPY
REGIMEN 15 ML TWO OR THREE TIMES DAILY FOR ADULTS.
DOSAGE FORM CALCIUM GLUBIONATE SYRUP 1.8 GM OF CALCIUM GLUBIONATE PER 5 ML
NOTE 1.8 GRAMS OF CALCIUM GLUBIONATE PROVIDES 115 MG OF ELEMENTAL CALCIUM.

CALCIUM GLUCEPTATE USP
CATEGORY 40:12 REPLACEMENT ION THERAPY
DOSAGE FORM CALCIUM GLUCEPTATE INJECTION 5 ML, EACH ML CONTAINS 18 MG OF CALCIUM *
OR 0.9 MILLIEQUIVALENTS PER ML (EQUIVALENT IN CALCIUM CONTENT TO 2 ML
OF 10% W/V CALCIUM GLUCONATE INJECTION.)
PROVIDES 4.5 MEQ OF CALCIUM PER 5 ML AMPUL

CALCIUM LACTATE NF
CATEGORY 40:12 REPLACEMENT ION THERAPY
REGIMEN ORAL: TWO TABLETS WITH MEALS AND AT BEDTIME.
REQUIREMENT: APPROXIMATELY ONE GRAM DAILY.
MILD HYPOCALCEMIC TETANY: 4 GRAMS THREE TIMES DAILY.
DOSAGE FORM CALCIUM LACTATE TABLETS NF 650 MG
EACH 650 MG TABLET EQUIVALENT TO 84.5 MG CALCIUM.

CAMPHORATED OPIUM TINCTURE - SEE OPIUM USP

CAPOTEN - SEE CAPTOPRIL

CAPTOPRIL
TRADE NAME CAPOTEN
CATEGORY 24:08 HYPOTENSIVE AGENT
REGIMEN ORAL: INITIAL, 25 MG THREE TIMES A DAY ONE HOUR BEFORE MEALS.
THEN 25 MG TO 150 MG AS NEEDED FOR HYPERTENSION.
CAPTOPRIL IS AN ANGIOTENSIN CONVERTING ENZYME INHIBITOR.
CONCOMITANT USE WITH OTHER HYPOTENSIVE AGENTS:

REDUCE DOSE OF EACH HYPOTENSIVE AGENT BY 50%.
NOTE: DO NOT EXCEED A MAXIMUM OF 450 MG DAILY.
DOSAGE FORM CAPTOPRIL TABLETS 50 MG *CAPOTEN*
NOTE USE IS AUTHORIZED FOR INTERNAL MEDICINE SERVICE.
CAUTIONS POSSIBLE AGRANULOCYTOSIS AND CYTOPENIA.

CARAFATE - SEE SUCRALFATE

CARBAMAZEPINE
TRADE NAME TEGRETOL
CATEGORY 28:12 ANTICONVULSANTS
REGIMEN TRIGEMINAL NEURALGIA, INITIALLY: 100 MG TWICE DAILY ON FIRST DAY,
WITH MEALS, IF POSSIBLE. THEREAFTER, DOSE GRADUALLY INCREASED IN
100 MG INCREMENTS EVERY 12 HOURS UNTIL FREEDOM FROM PAIN IS ACHIEVED.
MAINTENANCE DOSE IS 400 MG TO 800 MG DAILY.
EPILEPSY- 200 MG TWICE A DAY ON THE FIRST DAY INCREASED 200 MG PER
DAY UNTIL OPTIMAL RESPONSE IS OBTAINED.
DOSAGE FORM CARBAMAZEPINE TABLETS 200 MG *TEGRETOL*
CAUTIONS WARNING: FOLLOWING TREATMENT WITH TEGRETOL, BRAND OF CARBAMAZEPINE,
DEATHS FROM APLASTIC ANEMIA HAVE BEEN REPORTED.
AGRANULOCYTOSIS, THROMBOCYTOPENIA, AND TRANSITORY LEUKOPENIA HAVE
BEEN OBSERVED. IN ORDER TO DETECT SERIOUS BONE MARROW INJURY EARLY
COMPLETE BLOOD AND PLATELET COUNTS SHOULD BE DONE FREQUENTLY.
SORE THROAT, FEVER OR ORAL LESIONS MAY BE EARLY SIGNS.

CARBENICILLIN, DISODIUM
TRADE NAME GEOPEN
PYOPEN
CATEGORY 8:12.16 PENICILLIN
REGIMEN VARIES ACCORDING TO INFECTION
DOSAGE FORM CARBENICILLIN DISODIUM INJECTION FOR IM OR IV USE, 5 GM
INTERACTION WITH PROBENECID: PROLONG BLOOD LEVELS OF PENICILLINS.

CARBENICILLIN INDANYL SODIUM
TRADE NAME GEOCILLIN
CATEGORY 8:12.16 PENICILLIN
REGIMEN 1-2 TABLETS FOUR TIMES A DAY
DOSAGE FORM CARBENICILLIN INDANYL SODIUM 382 MG TABLETS

CARBOCAINE - SEE MEPIVACAINE HYDROCHLORIDE

CARDIZEM - SEE DILTIAZEM

CARPINE, ISOPTO - SEE PILOCARPINE HYDROCHLORIDE

CASCARA SAGRADA
CATEGORY 56:12 CATHARTIC
REGIMEN FLUIDEXTRACT, AROMATIC, 5 ML AT BEDTIME.
DOSAGE FORM CASCARA SAGRADA FLUID EXTRACT 1 GM PER ML, AROMATIC

CATAPRES - SEE CLONIDINE HYDROCHLORIDE

CECLOR - SEE CEFACLOR

TRADE NAME CECLOR
CATEGORY 8:12.06 CEPHALOSPORINS
REGIMEN CHILDREN: 20 MG PER KG PER DAY IN DIVIDED DOSES.
SHOULD BE USED WITH CAUTION IN PATIENTS WITH IMPAIRED RENAL FUNCTION.
DOSAGE FORM CEFACLOR ORAL SUSPENSION 125 MG PER 5 ML, 150 ML
INTERACTION WITH COLISTIN: POSSIBLE RENAL TOXICITY.
WITH ETHACRYNIC ACID: ADDITIVE FOR POSSIBLE NEPHROTOXICITY.
WITH FUROSEMIDE: ADDITIVE FOR POSSIBLE NEPHROTOXICITY.
WITH GENTAMICIN: POSSIBLE NEPHROTOXICITY.
WITH KANAMYCIN: POSSIBLE NEPHROTOXICITY.
WITH NEOMYCIN: POSSIBLE NEPHROTOXICITY.
WITH PROBENECID: INHIBITION OF RENAL EXCRETION TO INCREASE
CEPHALOSPORIN TOXICITY.
WITH STREPTOMYCIN: POSSIBLE NEPHROTOXICITY.

CEFAZOLIN SODIUM
TRADE NAME ANCEF
KEFZOL
CATEGORY 8:12.06 CEPHALOSPORINS
REGIMEN ADULT: MILD INFECTION, 250 MG TO 500 MG EVERY 8 HOURS.
ADULT- 500 MG TO 1 GRAM EVERY 8 HOURS.
ADULT, SEVERE INFECTION: 1 GM TO 2 GM EVERY 6 TO 8 HOURS.
MAXIMUM DOSE SHOULD NOT EXCEED 12 GRAMS PER DAY.
FIRST GENERATION CEPHALOSPORIN - CEPHALOSPORIN OF CHOICE LOCALLY.
USED TO TREAT RESPIRATORY TRACT, URINARY TRACT, SOFT TISSUE,
AND BONE INFECTIONS AFTER APPROPRIATE CULTURE.
DOSAGE FORM CEFAZOLIN SODIUM FOR INJECTION 1.0 GM
CEFAZOLIN SODIUM INJECTION 1 GM IVPB PREMIXED IN D5W 50 ML
INTERACTION WITH AMINOGLYCOSIDES: POSSIBLE NEPHROTOXICITY.
WITH COLISTIN: POSSIBLE NEPHROTOXICITY.
WITH ETHACRYNIC ACID: ADDITIVE FOR POSSIBLE NEPHROTOXICITY.
WITH FUROSEMIDE: ADDITIVE FOR POSSIBLE NEPHROTOXICITY.
WITH GENTAMICIN: POSSIBLE NEPHROTOXICITY.
WITH KANAMYCIN: POSSIBLE NEPHROTOXICITY.
WITH NEOMYCIN: POSSIBLE NEPHROTOXICITY.
WITH PROBENECID: INHIBITION OF RENAL EXCRETION TO INCREASE
CEPHALOSPORIN TOXICITY.
WITH STREPTOMYCIN: POSSIBLE NEPHROTOXICITY.

CEFOXITIN
TRADE NAME MEFOXIN
CATEGORY 8:12.28 OTHER ANTIBIOTICS
REGIMEN ADULT: IV OR IM, 1 TO 2 GM EVERY 6 TO 8 HOURS.
DETERMINE DOSAGE AND ROUTE OF ADMINISTRATION BY SUSCEPTIBILITY
OF THE CAUSATIVE ORGANISMS, AND SEVERITY OF THE INFECTION.
DOSAGE FORM CEFOXITIN SODIUM 1 GM VIAL *MEFOXIN*
INTERACTION WITH AMINOGLYCOSIDES: POSSIBLE NEPHROTOXICITY.
WITH COLISTIN: POSSIBLE NEPHROTOXICITY.
WITH ETHACRYNIC ACID: ADDITIVE FOR POSSIBLE NEPHROTOXICITY.
WITH FUROSEMIDE: ADDITIVE FOR POSSIBLE NEPHROTOXICITY.
WITH GENTAMICIN: POSSIBLE NEPHROTOXICITY.
WITH KANAMYCIN: POSSIBLE NEPHROTOXICITY.

WITH NEOMYCIN: POSSIBLE NEPHROTOXICITY.
WITH PROBENECID: INHIBITION OF RENAL EXCRETION TO INCREASE
CEPHALOSPORIN TOXICITY.
WITH STREPTOMYCIN: POSSIBLE NEPHROTOXICITY.

CEPACOL - SEE CETYLPYRIDINIUM CHLORIDE

CEPACOL ANESTHETIC TROCHES - SEE CETYLPYRIDINIUM CHLORIDE

CEPHRADINE
TRADE NAME ANSPOR
VELOSEF
CATEGORY 8:12.06 CEPHALOSPORINS
REGIMEN ORAL: USUAL ADULT DOSAGE IS 250 MG TO 500 MG EVERY 6 HOURS.
FOR SEVERE INFECTION , LARGER DOSES MAY BE NEEDED.
THE USUAL ORAL DOSAGE FOR CHILDREN IS 25 TO 50 MG PER KG
OF BODY WEIGHT PER DAY, GIVEN IN 4 EQUALLY DIVIDED DOSES.
THE MANUFACTURERS RECOMPEND A PEDIATRIC DOSAGE OF 75 MG TO
100 MG PER KG OF BODY WEIGHT PER DAY GIVEN IN 4 EQUALLY DIVIDED
DOSES FOR THE TREATMENT OF OTITIS MEDIA CAUSED BY H. INFLUENZA.
THE ORAL PEDIATRIC DOSAGE SHOULD NOT EXCEED 4 GRAMS PER DAY.
THE USUAL DOSAGE FOR CHILDREN OLDER THAN 1 YEAR OF AGE IS
50 MG TO 100 MG PER KG OF BODY WEIGHT PER DAY IN 4 EQUALLY
DIVIDED DOSES. DOSES AS HIGH AS 300 MG PER KG OF BODY WEIGHT
PER DAY HAVE BEEN USED SAFELY IN SEVERELY ILL INFANTS AND CHILDREN.
PEDIATRIC DOSAGE SHOULD NOT EXCEED THAT RECOMMENDED FOR ADULTS.
DOSAGE FORM CEPHRADINE CAPSULES 250 MG
INTERACTION WITH FUROSEMIDE: ADDITIVE FOR POSSIBLE NEPHROTOXICITY.
WITH GENTAMICIN: POSSIBLE NEPHROTOXICITY.
WITH KANAMYCIN: POSSIBLE NEPHROTOXICITY.
WITH PROBENECID: INHIBITION OF RENAL EXCRETION TO INCREASE
CEPHALOSPORIN TOXICITY.
WITH STREPTOMYCIN: POSSIBLE NEPHROTOXICITY.

CERESPAN CAPSULES - SEE PAPAVERINE HYDROCHLORIDE

CERUMENEX - SEE TRIETHANOLAMINE

CETACAINE - SEE BENZOCAINE

CETYLPYRIDINIUM CHLORIDE NF
TRADE NAME CEPACOL
CEPACOL ANESTHETIC TROCHES
CATEGORY 52:28 MOUTHWASHES, GARGLES AND LOZENGES
REGIMEN DISSOLVE ONE IN MOUTH EVERY 2 TO 3 HOURS AS NEEDED.
DOSAGE FORM CETYLPYRIDINIUM CHLORIDE AND BENZOCAINE TROCHES
EACH TROCHE CONTAINS 10 MG OF BENZOCAINE *CEPACOL ANESTHETIC TROCHES*
CETYLPYRIDINIUM CHLORIDE MOUTHWASH AND GARGLE, 150 ML
CEPACOL MOUTHWASH AND GARGLE
NOTE CEPACOL LOZENGES ARE PREPACKED IN 4'S AND 8'S.

CHIGGER LOTION
TRADE NAME CHIGG-AWAY
CATEGORY 84:08 SKIN AND MUCOUS MEMBRANE ANTIPRURITIC AND LOCAL ANESTHETIC

-CONTINUED- CHIGGER LOTION
DOSAGE FORM CHIGGER LOTION, 120 ML
BENZOCAINE 1.000 %
SULFUR 10.000 %
INERT INGREDIENTS 89.000 %

CHLORAFED - SEE CHLORPHENIRAMINE

CHLORAL HYDRATE
TRADE NAME NOCTEC
CATEGORY 28:24 SEDATIVES AND HYPNOTICS
REGIMEN HYPNOTIC, ADULT- 500 MG-1 GM.
HYPNOTIC, PEDIATRIC: 50 MG PER KG OF BODY WEIGHT.
SEDATIVE, ADULT- 250 MG 3 TIMES A DAY AFTER MEALS.
SEDATIVE, PEDIATRIC: 8 MG PER KG OF BODY WEIGHT 3 TIMES A DAY AFTER MEALS.
****CAUTION: PEDIATRIC DOSES SHOULD NOT EXCEED 1 GRAM FOR HYPNOTIC OR 500 MG THREE TIMES A DAY AS A SEDATIVE.****
DOSAGE FORM CHLORAL HYDRATE SYRUP USP, 500 MG PER 5 ML
CAUTIONS CHLORAL HYDRATE MAY HAVE AN EXAGGERATED EFFECT IN LIVER OR KIDNEY DISEASE.
INTERACTION WITH ALCOHOL: MUTUAL POTENTIATION TO PROLONG HYPNOTIC EFFECT.

CHLORAMPHENICOL (SYSTEMIC)
TRADE NAME CHLOROMYCETIN
CATEGORY 8:12.08 CHLORAMPHENICOL
REGIMEN 50 MG PER KG GIVEN IN 4 EQUALLY DIVIDED DOSES EVERY 6 HOURS.
NOTE WARNING-----BLOOD DYSCRASIAS MAY BE ASSOCIATED WITH INTERMITTENT OR PROLONGED USE. IT IS ESSENTIAL THAT ADEQUATE BLOOD STUDIES BE MADE IN PREMATURE AND FULL TERM INFANTS. VASCULAR COLLAPSE MAY BE PRODUCED BY LARGE DOSES OF THE DRUG. THE RECOMMENDED DOSE IS 25 MG PER KG PER 24 HOURS IN THE PREMATURE INFANT AND 50 MG PER KG PER 24 HOURS IN THE FULL TERM INFANT.
DOSAGE FORM STERILE CHLORAMPHENICOL SODIUM SUCCINATE INJECTION USP 1 GM PER VIAL. FOR IV USE ONLY.
INTERACTION WITH ALCOHOL: INHIBITS INTERMEDIARY METABOLISM OF ALCOHOL TO PRODUCE ANTABUSE-LIKE SYMPTOMS.
WITH ANTICOAGULANTS, ORAL: INHIBIT MICROSOMAL ENZYMES TO INCREASE DICUMAROL EFFECT.
WITH HYPOGLYCEMICS, ORAL: INHIBITS MICROSOMAL ENZYMES TO INCREASE TOLBUTAMIDE HYPOGLYCEMIA AND POSSIBLY CHLORPROPAMIDE HYPOGLYCEMIA.
WITH PHENYTOIN: INHIBIT MICROSOMAL ENZYMES TO INCREASE PHENYTOIN TOXICITY.

CHLORASEPTIC - SEE PHENOL AND/OR MOUTHWASH, ANESTHETIC AND ANTISEPTIC

CHLORDIAZEPOXIDE HYDROCHLORIDE NF
TRADE NAME LIBRIUM
CATEGORY 28:24 SEDATIVE AND HYPNOTICS
REGIMEN ORAL, 5 TO 25 MG THREE OR FOUR TIMES DAILY.
PARENTERAL, 50 TO 100 MG IV OR IM
DOSAGE FORM CHLORDIAZEPOXIDE HYDROCHLORIDE CAPSULES NF 10 MG
CHLORDIAZEPOXIDE HYDROCHLORIDE INJECTION NF, 100 MG AMPULE WITH DILUENT
NOTE CHLORDIAZEPOXIDE IS A SCHEDULE IV CONTROLLED MEDICATION.

-CONTINUED- CHLORDIAZEPOXIDE HYDROCHLORIDE NF
QUANTITY DISPENSED IS LIMITED TO A ONE MONTH SUPPLY.
NO REFILLS ARE ALLOWED ON CHLORDIAZEPOXIDE.

CHLOROMYCETIN - SEE CHLORAMPHENICOL

CHLOROQUINE
TRADE NAME ARALEN
CATEGORY 8:20 PLASMODICIDE
REGIMEN ANTI-AMEBIC, 500 MG 3 TIMES DAILY FOR 2 WEEKS, THEN 750 MG TWICE WEEKLY FOR SEVERAL MONTHS.
ANTI-MALARIAL SUPPRESSIVE, 500 MG WEEKLY
BEGIN 2 WEEKS PRIOR TO EXPOSURE; CONTINUE FOR 6-8 WEEKS AFTER LEAVING ENDEMIC AREA.
DOSAGE FORM CHLOROQUINE PHOSPHATE TABLETS 500 MG
NOTE 500 MG OF PHOSPHATE SALT IS EQUIVALENT TO 300 MG OF BASE.

CHLOROQUINE PHOSPHATE AND PRIMAQUINE PHOSPHATE TABLETS
TRADE NAME ARALEN WITH PRIMAQUINE
CATEGORY 8:20 PLASMODICIDE
REGIMEN ADULT DOSAGE, 1 TABLET WEEKLY
START AT LEAST ONE DAY PRIOR TO ENTERING ENDEMIC AREA; CONTINUE THIS SCHEDULE FOR 8 WEEKS AFTER LEAVING THE ENDEMIC AREA.
DOSAGE FORM CHLOROQUINE PHOSPHATE AND PRIMAQUINE PHOSPHATE TABLETS
EACH TABLET CONTAINS:
CHLOROQUINE PHOSPHATE 500 MG
PRIMAQUINE PHOSPHATE 79 MG
NOTE *FOR MALARIA PROPHYLAXIS ONLY*

CHLORPHENIRAMINE MALEATE USP
TRADE NAME CHLORAFED
CHLOR-TRIMETON
CATEGORY 4:00 ANTIHISTAMINE
REGIMEN ORAL, ADULT- 2-4 MG 3-4 TIMES DAILY OR 8-12 MG 2-3 TIMES DAILY.
PEDIATRIC- 1-2 MG 3-4 TIMES DAILY OR 8 MG ONCE OR TWICE DAILY.
ORAL- 5 - 10 ML 4 TIMES A DAY.
DOSAGE FORM CHLORPHENIRAMINE MALEATE SYRUP, 2 MG PER 5 ML, 120 ML
CONTAINS 7% ALCOHOL
CHLORPHENIRAMINE MALEATE TABLETS USP 4 MG
CHLORPHENIRAMINE MALEATE EXTENDED RELEASE TABLET 8 MG *CHLOR-TRIMETON*
CHLORPHENIRAMINE COMPOUND ELIXIR *CHLORAFED*NEOHISTINE ELIXIR*
EACH 5 ML CONTAINS:
CHLORPHENIRAMINE MALEATE 2 MG
PSEUDOEPHEDRINE 30 MG

CHLORPROMAZINE HYDROCHLORIDE USP
TRADE NAME CHLOR-PZ
THORAZINE
CATEGORY 28:16.08 TRANQUILIZER
REGIMEN ORAL, DOSAGE VARIES
PARENTERAL, 25 MG IM OR IV
DOSAGE FORM CHLORPROMAZINE HYDROCHLORIDE TABLETS USP 25 MG
CHLORPROMAZINE HYDROCHLORIDE TABLETS USP 100 MG
CAUTIONS ALCOHOL SHOULD NOT BE CONSUMED WHILE TAKING CHLORPROMAZINE.

TRADE NAME DIABINESE
CATEGORY 68120 ANTI-DIABETIC AGENT
REGIMEN 100 MG TO 500 MG DAILY
DOSAGE FORM CHLORPROPAMIDE TABLETS USP 250 MG
INTERACTION WITH ALCOHOL: INHIBITS INTERMEDIARY METABOLISM OF ALCOHOL TO PRODUCE ANTABUSE-LIKE SYMPTOMS. (RARE)
WITH ANTIHYPERTENSIVES: POSSIBLE HYPOGLYCEMIA WITH GUANETHIDINE.
WITH BISHYDROXYCOUMARIN: INHIBITS METABOLISM TO INCREASE SERUM LEVELS AND MAY CAUSE HYPOGLYCEMIC REACTIONS.
WITH CHLORAMPHENICOL: CAN PROLONG HALF-LIFE TO CAUSE HYPOGLYCEMIC REACTION.
WITH PHENYLBUTAZONE: INCREASED SERUM LEVELS MAY RESULT IN HYPOGLYCEMIA.
WITH SALICYLATES: DISPLACEMENT FROM BINDING SITES MAY INCREASE HYPOGLYCEMIA.
WITH SULFONAMIDES, LONG-ACTING: POSSIBLE HYPOGLYCEMIA.
WITH THIAZIDE DIURETICS: ELEVATE BLOOD GLUCOSE LEVELS AND ANTAGONIZE HYPOGLYCEMIC EFFECT.

CHLOR-PZ - SEE CHLORPROMAZINE HYDROCHLORIDE

CHLORTHALIDONE
TRADE NAME HYGROTON
CATEGORY 40128 DIURETIC
REGIMEN INITIALLY, 50 TO 100 MG DAILY, OR 100 TO 200 MG ON ALTERNATE DAYS. FOR HYPERTENSION, 25 TO 100 MG DAILY.
DOSAGE FORM CHLORTHALIDONE TABLETS 100 MG *HYGROTON*

CHLOR-TRIMETON - SEE CHLORPHENIRAMINE MALEATE

CHLORZOXAZONE AND ACETAMINOPHEN
TRADE NAME PARAFON FORTE
CATEGORY 12120 SKELETAL MUSCLE RELAXANTS
REGIMEN TWO TABLETS FOUR TIMES DAILY
DOSAGE FORM CHLORZOXAZONE AND ACETAMINOPHEN TABLETS
EACH TABLET CONTAINS:
CHLORZOXAZONE 250 MG
ACETAMINOPHEN 300 MG
CAUTIONS CHLORZOXAZONE MAY CAUSE DROWSINESS.
ALCOHOL SHOULD NOT BE CONSUMED WHILE TAKING CHLORZOXAZONE.

CHOLESTYRAMINE RESIN
TRADE NAME CUEMID
QUESTRAN
CATEGORY 24106 ANTILIPEMIC AGENT
REGIMEN ORAL: 3 GM TO 4 GM THREE TO FOUR TIMES A DAY BEFORE MEALS.
DOSAGE FORM CHOLESTYRAMINE RESIN POWDER
CHOLESTYRAMINE RESIN 4 GRAM PACKET BOX OF 30 *QUESTRAN*

CIMETIDINE
TRADE NAME TAGAMET
CATEGORY 56140 MISCELLANEOUS GASTRO-INTESTINAL AGENT (DUODENAL ULCER TREATMENT)
REGIMEN ORAL- 300 MG 4 TIMES A DAY WITH MEALS AND AT BEDTIME. DOSAGE SHOULD BE

CONTINUED CIMETIDINE
ADJUSTED TO INDIVIDUAL PATIENT NEED BUT NOT TO EXCEED 2.4 GM PER DAY.
INJECTION- ADULT- 300 MG EVERY 6 HOURS, DOSE SHOULD BE ADJUSTED TO INDIVIDUAL PATIENT NEED BUT NOT TO EXCEED 2.4 GM PER DAY.
DOSAGE FORM CIMETIDINE TABLETS 300 MG *TAGAMET*
CIMETIDINE HYDROCHLORIDE INJECTION 150 MG PER ML, 2 ML VIAL *TAGAMET*
NOTE QUANTITY IS LIMITED TO A ONE MONTH SUPPLY WITH ONE REFILL.
CAUTIONS MAY PROLONG PROTHROMBIN TIMES WHEN ADMINISTERED WITH WARFARIN.

CITRATE OF MAGNESIA - SEE MAGNESIUM CITRATE

CLEOCIN - SEE CLINDAMYCIN

CLINDAMYCIN (SYSTEMIC)
TRADE NAME CLEOCIN
CATEGORY 8112.28 OTHER ANTIBIOTICS
REGIMEN ORAL: 150-300 MG EVERY SIX HOURS FOR MILD TO MODERATE INFECTIONS
300-450 MG EVERY SIX HOURS FOR SEVERE INFECTION.
INJECTION, ADULT:-SERIOUS INFECTIONS- 600 TO 1200 MG PER 24 HOURS GIVEN IN 3 OR 4 EQUAL DOSES. -MORESEVERE INFECTIONS- 1200 TO 2700 MG PER 24 HOURS GIVEN IN 3 OR 4 EQUAL DOSES.
INJECTION, PEDIATRIC:-SERIOUS INFECTIONS- 15 TO 25 MG PER KG PER DAY GIVEN IN 3 OR 4 EQUAL DOSES. -MORE SEVERE INFECTIONS- 25 TO 40 MG
DOSAGE FORM CLINDAMYCIN INJECTION 150 MG PER ML, 4 ML AMPUL
CAUTIONS CLINDAMYCIN MAY COMMONLY CAUSE ANOREXIA AND DIARRHEA.
CLINDAMYCIN MAY CAUSE PSEUDOMEMBRANOUS COLITIS.

CLINDAMYCIN (TOPICAL)
TRADE NAME CLEOCIN T TOPICAL SOLUTION
CATEGORY 84104.04 SKIN AND MUCOUS MEMBRANE ANTIBIOTIC
REGIMEN TOPICAL: APPLY LOCALLY TO AFFECTED AREA TWICE A DAY.
(FOR TREATMENT OF STREPT. STAPH. AND PNEUMOCOCCI INFECTIONS)
DOSAGE FORM CLINDAMYCIN 1% IN ALCOHOL AND PROPYLENE GLYCOL, TOPICAL SOLUTION, 60 ML
NOTE USE OF TOPICAL CLEOCIN IS AUTHORIZED FOR DERMATOLOGY SERVICE.
USE IS AUTHORIZED AFTER AN UNSUCCESSFUL TRIAL WITH STATICIN.

CLINITEST - SEE URINE CONTENTS DIAGNOSTIC AND/OR CUPRIC SULFATE REAGENT

CLINORIL - SEE SULINDAC

CLOFIBRATE
TRADE NAME ATROMID-S
CATEGORY 24106 ANTILIPEMIC AGENT
REGIMEN ORAL: 500 MG FOUR TIMES A DAY. (REDUCE DOSAGE WITH ANTI-COAGULANTS)
DOSAGE FORM CLOFIBRATE CAPSULES 500 MG
CAUTIONS POSSIBLE INCREASED RISK OF MALIGNANCY IN HUMANS WITH CLOFIBRATE.
(HEPATIC TUMORIGENICITY HAS BEEN OBSERVED IN RODENTS)
SUBSTANTIAL EVIDENCE OF BENEFICIAL EFFECT HAS NOT BEEN SHOWN ON CARDIOVASCULAR MORTALITY -- INCREASED RISK OF CHOLELITHIASIS.
USE IS LIMITED TO HYPERCHOLESTEROLEMIA AND / OR HYPERTRIGLYCERIDEMIA.
DISCONTINUE THERAPY IF SIGNIFICANT LIPID REDUCTION IS NOT OBTAINED.

CLOMID - SEE CLOMIPHENE CITRATE

CLOMIPHENE CITRATE

-CONTINUED- CLOMIPHENE CITRATE
TRADE NAME CLOMID
CATEGORY 92100 UNCLASSIFIED THERAPEUTIC AGENT - OVULATION INDUCING-
REGIMEN FIRST COURSE: 50 MG DAILY FOR 5 DAYS.
SECOND COURSE: 100 MG DAILY FOR 5 DAYS.
DOSAGE FORM CLOMIPHENE CITRATE TABLETS 50 MG

CLONAZEPAM
TRADE NAME CLONOPIN
CATEGORY 20132 ANTICONVULSANTS
DOSAGE FORM CLONAZEPAM TABLETS 0.5 MG *CLONOPIN*
NOTE CLONAZEPAM IS A SCHEDULE IV CONTROLLED SUBSTANCE.
QUANTITY DISPENSED IS LIMITED
TO 1 MONTH SUPPLY WITH 5 REFILLS.
CAUTIONS CLONAZEPAM MAY CAUSE DROWSINESS.
ALCOHOL SHOULD NOT BE CONSUMED WHILE TAKING CLONAZEPAM.

CLONIDINE HYDROCHLORIDE
TRADE NAME CATAPRES
CATEGORY 24100 HYPOTENSIVE AGENTS
REGIMEN 0.1 MG TWICE DAILY INCREASED BY 0.1 - 0.2 MG PER DAY UNTIL
DESIRED RESPONSE IS ACHIEVED. MAINTENANCE DOSE- 0.2 - 1.2 MG PER DAY
DOSAGE FORM CLONIDINE HYDROCHLORIDE TABLETS 0.2 MG *CATAPRES*
NOTE OVERDOSE ANTIDOTE IS TOLAZOLINE HYDROCHLORIDE.
CAUTIONS CLONIDINE MAY CAUSE DROWSINESS.
REDUCE DOSE GRADUALLY. AN ABRUPT DECREASE MAY CAUSE A RAPID HEART BEAT
AND AN INCREASE IN BLOOD PRESSURE.

CLONOPIN - SEE CLONAZEPAM

CLOTRIMAZOLE
TRADE NAME LOTRIMIN
GYNE-LOTRIMIN
MYCELEX
CATEGORY 84104.08 SKIN AND MUCOUS MEMBRANE FUNGICIDE
REGIMEN TOPICALLY: APPLY TWICE DAILY TO AFFECTED AND SURROUNDING AREA.
VAGINAL: ONE TABLET DAILY FOR SEVEN CONSECUTIVE DAYS.
VAGINAL: ONE TABLET VAGINALLY TWICE A DAY FOR 3 CONSECUTIVE DAYS.
ALTERNATE: TWO TABLETS VAGINALLY AT BEDTIME FOR 3 CONSECUTIVE DAYS.
[NOTE: THIS REGIMEN NOT RECOMMENDED FOR USE IN PREGNANT PATIENTS]
DOSAGE FORM CLOTRIMAZOLE TOPICAL CREAM 1%, 15 GM *LOTRIMIN*MYCELEX*
CLOTRIMAZOLE TOPICAL SOLUTION 1%, 30 ML *LOTRIMIN*MYCELEX*
CLOTRIMAZOLE TABLETS, VAGINAL, 100 MG *GYNE-LOTRIMIN*MYCELEX* G*
PACKAGES OF 7 VAGINAL TABLETS WITH APPLICATOR

COAL TAR USP
TRADE NAME ESTAR
SUPUDINE
CATEGORY 84152 KERATOPLASTIC AGENT
DOSAGE FORM COAL TAR 5% IN HYDRO-ALCOHOLIC GEL, 90 GM *ESTAR GEL*
COAL TAR 0.5%, SULFUR 2%, SALICYLIC ACID 2% SHAMPOO, 120 ML *SEBUTONE**

CODEINE PHOSPHATE USP
CATEGORY 48100 EXPECTORANT AND COUGH PREPARATIONS
DOSAGE FORM CODEINE PHOSPHATE POWDER FOR MANUFACTURING PURPOSES

-CONTINUED- CODEINE PHOSPHATE USP
NOTE CODEINE IS A SCHEDULE II CONTROLLED MEDICATION.

CODEINE SULFATE NF
CATEGORY 28100 ANALGESIC
48100 EXPECTORANTS AND COUGH PREPARATIONS
DOSAGE FORM CODEINE SULFATE TABLETS NF 30 MG
NOTE CODEINE IS A SCHEDULE II CONTROLLED MEDICATION.
PRESCRIPTIONS FOR CODEINE SULFATE TABLETS ARE NOT REFILLABLE.
CODEINE MAY CAUSE DROWSINESS.
CAUTIONS ALCOHOL SHOULD NOT BE CONSUMED WHILE TAKING CODEINE.

COGENTIN - SEE BENZTROPINE MESYLATE

COLACE - SEE DIOCTYL SODIUM SULFOSUCCINATE

COLCHICINE USP
CATEGORY 92100 UNCLASSIFIED
REGIMEN ORAL FOR GOUTY ARTHRITIS 600 MCG EVERY 1/2 TO 1 HOUR FOR 6 TO 8 DOSES,
OR UNTIL DIARRHEA OCCURS.
DOSAGE FORM COLCHICINE TABLETS USP 600 MCG (0.6 MG)
CAUTIONS COLCHICINE MAY CAUSE ALOPECIA.

COLLODION, FLEXIBLE
TRADE NAME NEW SKIN
CATEGORY 84126.08 BASIC OIL AND OTHER SOLVENT
DOSAGE FORM COLLODION, FLEXIBLE, 30 ML
NOTE DO NOT EXPOSE NEAR A FLAME --- FLAMMABLE ---

COLONIL - SEE DIPHENOXYLATE HYDROCHLORIDE

COMPAZINE - SEE PROCHLORPERAZINE

CORDRAN - SEE FLURANDRENOLIDE

CORGARD - SEE NADOLOL

CORTISPORIN - SEE HYDROCORTISONE AND/OR POLYMYXIN B

COUMADIN - SEE WARFARIN, SODIUM

CROMOLYN SODIUM
TRADE NAME INTAL
CATEGORY 92100 UNCLASSIFIED AGENT
REGIMEN THE CONTENTS OF ONE CAPSULE INHALED FOUR TIMES DAILY AT REGULAR
INTERVALS USING A SPINHALER/INHALER.
CROMOLYN SODIUM HAS NO ROLE IN TREATING ACUTE ASTHMA ATTACKS.
IS USED FOR PATIENTS WITH SEVERE PERENNIAL BRONCHIAL ASTHMA.
DOSAGE FORM CROMOLYN SODIUM FOR INHALATION CAPSULES 20 MG, 60 CAPSULES *INTAL*
NOTE SPINHALER MUST BE ORDERED SEPARATELY.

CROTALINE ANTIVENIN
TRADE NAME ANTISNAKE BITE SERUM
CATEGORY 80106 SERUMS
REGIMEN 10 TO 50 ML DEPENDING ON THE SIZE AND SPECIES. SIZE AND

-CONTINUED- CROTALINE ANTIVENIN
CONDITION OF PATIENT, AND TIME ELAPSED BETWEEN BITE AND ADMINISTRATION OF THE ANTIVENIN. THE SMALLER THE BODY OF THE PATIENT THE LARGER THE INITIAL DOSE REQUIRED.
DOSAGE FORM CROTALINE ANTIVENIN, POLYVALENT, 10 ML

CROTAMITON
TRADE NAME EURAX
CATEGORY 84:04.12 SCABICIDES AND PEDICULICIDES
REGIMEN MASSAGE INTO SKIN OF ENTIRE BODY FROM CHIN DOWN
DO NOT APPLY TO THE FACE, EYES, MUCOUS MEMBRANES OR URETHRAL MEATUS.
DOSAGE FORM CROTAMITON 10% IN A VANISHING CREAM BASE, 60 GM TUBE *EURAX*

CUPRIC SULFATE REAGENT
TRADE NAME CLINITEST
CATEGORY 36:88 URINE CONTENTS - DIAGNOSTIC AGENTS
DOSAGE FORM CUPRIC SULFATE REAGENT TABLETS *CLINITEST TABLETS*

CUPRIMINE - SEE PENICILLAMINE

CURARE - SEE TUBOCURARINE

CYANOCOBALAMIN USP
TRADE NAME REDISOL
RUBRAMIN PC
SYNTOBEX
VITAMIN B -12
CATEGORY 88:08 VITAMIN B COMPLEX
DOSAGE FORM CYANOCOBALAMIN INJECTION USP 1 MG (1000 MCG) PER ML, 10 ML

CYCLOBENZAPRINE HYDROCHLORIDE
TRADE NAME FLEXERIL
CATEGORY 12:20 SKELETAL MUSCLE RELAXANT
REGIMEN ORAL ADULTS, 10 MG 3 TIMES DAILY NOT TO EXCEED 60 MG PER DAY.
NOTE: USE IS NOT RECOMMENCED FOR PERIODS OF LONGER THAN 2 TO 3 WEEKS.
DOSAGE FORM CYCLOBENZAPRINE HYDROCHLORIDE TABLETS 10 MG
NOTE QUANTITY DISPENSED IS LIMITED TO A FIVE DAY SUPPLY.
ONE REFILL IS AUTHORIZED FOR CYCLOBENZAPRINE.
CAUTIONS CYCLOBENZAPRINE MAY IMPAIR MENTAL AND/OR PHYSICAL ABILITIES REQUIRED FOR PERFORMANCE OF HAZARDOUS TASKS, SUCH AS OPERATING MACHINERY OR DRIVING A MOTOR VEHICLE.
BECAUSE OF ATROPINE-LIKE ACTION, CYCLOBENZAPRINE SHOULD BE USED WITH CAUTION IN PATIENTS WITH A HISTORY OF URINARY RETENTION, SINGLE-CLOSURE GLAUCOMA, INCREASED INTRAOCULAR PRESSURE, AND IN PATIENTS TAKING ANTICHOLINERGIC MEDICATION.
INTERACTION WITH MAO INHIBITORS: POSSIBLE HYPERPYRETIC CRISIS & SEVERE CONVULSIONS. (DEATH HAS RESULTED FROM MAO INHIBITORS AND TRICYCLIC ANTIDEPRESSANT)
WITH ALCOHOL: ENHANCED EFFECT OF CYCLOBENZAPRINE.
WITH BARBITURATES: ENHANCED EFFECT OF CYCLOBENZAPRINE.
WITH CNS DEPRESSANTS: ENHANCED EFFECT OF CYCLOBENZAPRINE.
WITH GUANETHIDINE AND SIMILARLY ACTING COMPOUNDS:
MAY BLOCK THE ANTIHYPERTENSIVE ACTION.

CYCLOPENTOLATE HYDROCHLORIDE USP
TRADE NAME CYCLOGYL

-CONTINUED- CYCLOPENTOLATE HYDROCHLORIDE USP
CATEGORY 52:24 MYDRIATIC
DOSAGE FORM CYCLOPENTOLATE HYDROCHLORIDE OPHTHALMIC SOLUTION 1%, 15 ML

CYCLOPHOSPHAMIDE NF
TRADE NAME CYTOXAN
CATEGORY 10:00 ANTINEOPLASTIC AGENT
REGIMEN INITIAL, 40 TO 50 MG PER KG, ORALLY OR IV
MAINTENANCE, ORAL, 1 TO 3 MG PER KG DAILY
PARENTERAL, 10 TO 15 MG PER KG WEEKLY
**********WARNING---LEUCOPENIC**********
DOSAGE FORM CYCLOPHOSPHAMIDE TABLETS NF 50 MG
CYCLOPHOSPHAMIDE FOR INJECTION 200 MG PER VIAL
NOTE CONTACT PHARMACY SERVICE ONE WEEK PRIOR TO USE
INTERACTION WITH BCG VACCINE, CHOLERA VACCINE, INFLUENZA VIRUS VACCINE, MEASLES MUMPS AND RUBELLA VACCINE, MEASLES VIRUS VACCINE LIVE, MUMPS VACCINE, MUMPS VIRUS VACCINE LIVE, POLIO VIRUS VACCINE LIVE, AND RABIES VACCINE: IMMUNOSUPPRESSANTS IMPAIR THE PATIENTS ABILITY TO PRODUCE AN ANTIBODY TITER IN RESPONSE TO AN ANTIGEN CHALLENGE. USE OF LIVE OR ATTENUATED VACCINES MAY RISK ACTUAL INFECTION WITH THE ANTIGENIC AGENT.

CYLERT - SEE PEMOLINE

CYPROHEPTADINE HYDROCHLORIDE
TRADE NAME PERIACTIN
CATEGORY 4:00 ANTIHISTAMINE
REGIMEN ORAL, INITIAL 4 MG THREE OR FOUR TIMES DAILY
DOSAGE FORM CYPROHEPTADINE HYDROCHLORIDE TABLETS 4 MG
CAUTIONS ANTIHISTAMINES MAY CAUSE DROWSINESS.
ALCOHOL SHOULD NOT BE CONSUMED WHILE TAKING ANTIHISTAMINES.

CYTOMEL - SEE LIOTHYRONINE, SODIUM

CYTOXAN - SEE CYCLOPHOSPHAMIDE

DALMANE - SEE FLURAZEPAM HYDROCHLORIDE

DANTHRON
TRADE NAME DOXIDAN
CATEGORY 56:12 CATHARTIC (LAXATIVE AND FECAL SOFTENER COMBINATION)
REGIMEN ORAL: ONE OR TWO CAPSULES AT BEDTIME.
DOSAGE FORM DANTHRON WITH DIOCTYL CALCIUM SULFOSUCCINATE *DOXIDAN*
EACH CAPSULE CONTAINS:
DANTHRON 50 MG
DIOCTYL CALCIUM SULFOSUCCINATE 60 MG

DANTROLENE SODIUM (MALIGNANT HYPERTHERMIA)
TRADE NAME DANTRIUM
CATEGORY 92:00 UNCLASSIFIED (MALIGNANT HYPERTHERMIA)
REGIMEN IV- FOR MALIGNANT HYPERTHERMIA: BY RAPID INFUSION 1 MG PER KG OF WEIGHT MAY BE REPEATED UP TO A TOTAL CUMULATIVE DOSE OF 10 MG PER KG OF WEIGHT IF ABNORMALITIES PERSIST OR REAPPEAR.
NOTE: NOT RECOMMENDED FOR USE DURING PREGNANCY.
DOSAGE FORM DANTROLENE SODIUM IV INJECTION 20 MG PER VIAL, 70 ML VIAL

-CONTINUED- DANTROLENE SODIUM (MALIGNANT HYPERTHERMIA)
AFTER RECONSTITUTION, PROTECT FROM DIRECT LIGHT AND USE WITHIN 6 HOUR

DAPSONE
TRADE NAME AVLOSULFON
DDS
CATEGORY 8:26 THE SULFONES
REGIMEN EITHER 100 MG TWICE WEEKLY 1-4 WKS OF THERAPY, THEN 200 MG TWICE
WEEKLY 5-8 WKS, 300 MG TWICE WEEKLY 9-12 WKS, AND FINALLY 400MG TWICE
WEEKLY THEREAFTER: OR 50 MG DAILY AFTER A MINIMUM OF TWO WEEKS OF
THERAPY THE DOSE MAYBE INCREASED TO 100 MG DAILY.
NOTE: ON THE WEEKLY SCHEDULE IT IS ADVISED THAT A WEEK REST PERIOD
BE TAKEN EVERY TWO MONTHS AND ON THE DAILY SCHEDULE
THAT A DAY REST PERIOD BE TAKEN EVERY WEEK.
INCREASES ARE ONLY MADE IN THE ABSENCE OF REQUIRED CLINICAL RESPONSE
AND THE ABSENCE OF TOXIC SIDE EFFECTS.
DOSAGE FORM DAPSONE TABLETS 25 MG *AVLOSULFON, DDS*

DECADRON - SEE DEXAMETHASONE

DECADRON TURBINAIRE - SEE DEXAMETHASONE

DECHOLIN - SEE DEHYDROCHOLIC ACID

DECHOLIN SODIUM - SEE DEHYDROCHOLATE SODIUM

DEFEROXAMINE MESYLATE
TRADE NAME DESFERAL
CATEGORY 64:00 HEAVY METAL ANTAGONIST
REGIMEN IM OR IVS 1 GM FOLLOWED BY 500 MG AT 4 HOUR INTERVALS FOR 2 DOSES.
ANTIDOTE FOR ACUTE IRON INTOXICATION (CHELATING AGENT)
DOSAGE FORM DEFEROXAMINE MESYLATE INJECTION 500 MG PER VIAL

DEHYDROCHOLIC ACID NF
CATEGORY 56:12 CATHARTICS AND LAXATIVES
DOSAGE FORM DEHYDROCHOLIC ACID TABLETS USP 250 MG

DELADUMONE OB - SEE ESTRADIOL AND/OR TESTOSTERONE

DELALUTIN - SEE HYDROXYPROGESTERONE

DELATESTRYL - SEE TESTOSTERONE

DELTA-CORTEF - SEE PREDNISOLONE

DELTASONE - SEE PREDNISONE

DEMEROL - SEE MEPERIDINE HYDROCHLORIDE

DEMULEN - SEE ETHYNODIOL DIACETATE AND/OR ETHINYL ESTRADIOL COMBS.

DENTAL PROTECTIVE BASE
TRADE NAME ORABASE
ORABASE WITH BENZOCAINE
DOSAGE FORM DENTAL PROTECTIVE BASE PASTE 5 GM *ORABASE*

-CONTINUED- DENTAL PROTECTIVE BASE
DENTAL PROTECTIVE BASE PASTE WITH BENZOCAINE 5 GM
ORABASE WITH BENZOCAINE

DEPAKENE - SEE VALPROIC ACID

DEPO MEDROL - SEE METHYLPREDNISOLONE

DEPO PROVERA - SEE MEDROXYPROGESTERONE ACETATE

DESQUAM-X - SEE BENZOYL PEROXIDE

DESYREL - SEE TRAZODONE

DEXAMETHASONE (EENT)
TRADE NAME DECADRON
NEO-DECADRON
CATEGORY 52:08 EENT ANTI-INFLAMMATORY AGENTS
DOSAGE FORM DEXAMETHASONE SODIUM PHOSPHATE 0.1% WITH NEOMYCIN 0.5%, OPHTHALMIC
SOLUTION, 5 ML *NEO-DECADRON 0.1%*

DEXAMETHASONE (SYSTEMIC)
TRADE NAME DECADRON
CATEGORY 68:04 ADRENAL HORMONE
DOSAGE FORM DEXAMETHASONE TABLETS 0.75 MG (750 MCG)
DEXAMETHASONE TABLETS 4 MG
DEXAMETHASONE SODIUM PHOSPHATE INJECTION 4 MG PER ML, 5 ML VIAL *
INTERACTION WITH PHENOBARBITAL: PHENOBARBITAL ENHANCES METABOLISM OF
CORTICOSTEROIDS AND PATIENTS MAY REQUIRE INCREASED DOSES OF
CORTICOSTEROIDS.

DEXBROMPHENIRAMINE
TRADE NAME DRIGEN
DRIXORAL
CATEGORY 4:00 ANTIHISTAMINE
REGIMEN ONE TABLET TWO TIMES A DAY.
DOSAGE FORM DEXBROMPHENIRAMINE AND PSEUDOEPHEDRINE TABLETS, SUSTAINED RELEASE
EACH TABLET CONTAINS:
DEXBROMPHENIRAMINE MALEATE 6 MG
PSEUDOEPHEDRINE SULFATE 120 MG
NOTE QUANTITY DISPENSED IS LIMITED TO A TEN DAY SUPPLY
UNLESS FOR CHRONIC ALLERGIES AND PATIENT IS SEEN BY ACTING ALLERGIST.
QUANTITY DISPENSED TO ALLERGY PATIENTS LIMITED TO 1 MONTH SUPPLY.
UNLESS *CHRONIC* IS NOTED ON THE PRESCRIPTION.
CAUTIONS ANTIHISTAMINES MAY CAUSE DROWSINESS.
ALCOHOL SHOULD NOT BE CONSUMED WHILE TAKING ANTIHISTAMINES.
INTERACTION WITH ANTICHOLINERGICS: ADDITIVE ANTICHOLINERGIC EFFECT.
WITH ANTIDEPRESSANTS, TRICYLIC: ADDITIVE ANTICHOLINERGIC EFFECT.
WITH CNS DEPRESSANTS: POTENTIATES SEDATION.
WITH PHENOTHIAZINES: ADDITIVE ANTICHOLINERGIC EFFECT.

DEXEDRINE - SEE DEXTROAMPHETAMINE SULFATE

DEXTROMETHORPHAN HYDROBROMIDE - SEE GUAIFENESIN AND/OR PHENYLEPHRINE
HYDROCHLORIDE AND/OR PHENYLPROPANOLAMINE FOR DM-CONTAINING PRODUCTS

DEXTROSE USP
CATEGORY 40:20 CALORIC AGENT
DOSAGE FORM DEXTROSE INJECTION USP 50%, 50 ML PREFILLED SYRINGE
CONTAINS 25 GRAMS PER 50 ML

DEXTROSTIX - SEE GLUCOSE OXIDASE (BLOOD)

DHE - SEE DIHYDROERGOTAMINE

DIABINESE - SEE CHLORPROPAMIDE

DIAMOX - SEE ACETAZOLAMIDE

DIAPHRAGMS AND ACCESSORIES
TRADE NAME ORTHO ALL-FLEX
CATEGORY 84:22.10 CONTRACEPTIVES (VAGINAL DEVICES)
DOSAGE FORM DIAPHRAGMS
TYPE: ALL FLEX--60,65,70,75,80,85,90 MM
NOTE AVAILABILITY DEPENDENT ON DEPOT SUPPLY ... CHECK WITH PHARMACY SERVICE.
USE IS AUTHORIZED FOR OB/GYN STAFF.

DIAZEPAM
TRADE NAME VALIUM
CATEGORY 28:24 SEDATIVE AND HYPNOTICS
REGIMEN 2-10 MG 2-4 TIMES A DAY
DOSAGE FORM DIAZEPAM TABLETS 5 MG
DIAZEPAM INJECTION 5 MG PER ML, 2 ML
DIAZEPAM TABLETS 5 MG (25 REVERSE NUMBERED, BLISTER PACKS IN A TAMPER PROOF CONTAINER)
NOTE PRESCRIPTIONS FOR CONTROLLED SUBSTANCES ARE NOT REFILLABLE.
DIAZEPAM IS A SCHEDULE IV CONTROLLED MEDICATION.
PHYSOSTIGMINE SALICYLATE (ANTILIRIUM) HAS BEEN USED SUCCESSFULLY IN DIAZEPAM -VALIUM- OVERDOSAGE.
CAUTIONS DIAZEPAM INJECTION IS ADMINISTERED BY DIRECT I.V. PUSH ONLY.
DO NOT MIX DIAZEPAM INJECTION WITH I.V. SOLUTIONS.
DIAZEPAM MAY CAUSE DROWSINESS.
ALCOHOL SHOULD NOT BE CONSUMED WHILE TAKING DIAZEPAM.
INTERACTION WITH ALCOHOL: ADDITIVE, ENHANCED CNS DEPRESSION.

DIAZOXIDE
TRADE NAME HYPERSTAT IV
CATEGORY 24:08 HYPOTENSIVE AGENT
DOSAGE FORM DIAZOXIDE IV INJECTION 15 MG PER ML, 20 ML
NOTE AVAILABLE ONLY FROM CRASH CART.

DIBUCAINE HYDROCHLORIDE USP
TRADE NAME NUPERCAINAL
CATEGORY 84:08 SKIN AND MUCOUS MEMBRANE ANTIPRURITIC AND LOCAL ANESTHETIC
REGIMEN TOPICAL, LOCALLY SEVERAL TIMES A DAY.
DOSAGE FORM DIBUCAINE OINTMENT 1%, 30 GM TUBES *NUPERCAINAL*

DICYCLOMINE HYDROCHLORIDE
TRADE NAME BENTYL
BENTYL-PB
CATEGORY 12:08 PARASYMPATHOLYTIC-CHOLINERGIC BLOCKING-AGENT

-CONTINUED- DICYCLOMINE HYDROCHLORIDE
REGIMEN ADULTS- 20 MG 3-4 TIMES A DAY.
CHILDREN- 10 MG 3-4 TIMES A DAY.
INFANTS- 5 MG 3-4 TIMES A DAY.
DOSAGE FORM DICYCLOMINE HYDROCHLORIDE TABLETS 20 MG *BENTYL*
DICYCLOMINE HYDROCHLORIDE SYRUP 10 MG PER 5 ML *BENTYL*
DICYCLOMINE HCL 20 MG WITH PHENOBARBITAL 1/4 GR PER TABLET *BENTYL-PB*
NOTE BENTYL-PB SYRUP IS NOT CARRIED IN STOCK. CL

DIENESTROL NF
TRADE NAME DIENESTROL CREAM
DV CREAM
CATEGORY 68:16 ESTROGENS
REGIMEN 1-2 APPLICATORFULS DAILY FOR 1-2 WEEKS.
MAINTENANCE, ONE APPLICATERFUL 2 OR 3 TIMES A WEEK.
DOSAGE FORM DIENESTROL VAGINAL CREAM 100 MCG PER GM (0.01%), 78 GM TUBE

DIETARY FOOD FORMULAS AND FOOD SUPPLEMENTS
TRADE NAME SUSTACAL
VIVONEX
DOSAGE FORM ELEMENTAL LOW RESIDUE FEEDING 80 GM PACKET *VIVONEX*
EACH 80 GRAM PACKET SUPPLIES: (RECONSTITUTED 300 ML)

CALORIES	300.00
PROTEIN	6.18 GM
FAT	430.00 MG
CARBOHYDRATES	69.20 GM

DIETARY SUPPLEMENT COMPLETE LIQUID DIET, 240 ML *SUSTACAL*
EACH LITER CONTAINS:

PROTEIN	61.5 GM	CARBOHYDRATE	140.0 GM
FAT	23.4 GM	CALORIES	1014.0

EACH 810 ML CONTAINS:

PROTEIN	8.0%	VITAMIN B1	1.5 MG
CARBOHYDRATE	18.0%	VITAMIN B2	1.8 MG
FAT	3.3%	VITAMIN B3	21.0 MG
VITAMIN A	5000 IU	VITAMIN B5	10.0 MG
VITAMIN D	400 IU	VITAMIN B6	2.0 MG
VITAMIN E	30 IU	VITAMIN B12	6.0 MCG
VITAMIN C	60 MG	IRON	18.0 MG
FOLIC ACID	400 MCG	CALCIUM	1.7 GM
CALORIES	1080		

ALSO BIOTIN, PHOSPHEROUS, IODINE, MAGNESIUM, COPPER, SODIUM, ZINC, POTASSIUM, AND MANGANESE.
NOTE OUTPATIENT DISPENSING OF DIETARY FOOD SUPPLEMENTS REQUIRES PRIOR APPROVAL OF MEDICAL FACILITY COMMANDER.
PRIOR APPROVAL OF THERAPEUTIC AGENTS BOARD.

DIGOXIN USP
TRADE NAME LANOXIN
CATEGORY 24:04 CARDIAC DRUG
DOSAGE FORM DIGOXIN TABLETS 0.250 MG
DIGOXIN ELIXIR USP 0.05 MG PER ML, 60 ML (WITH GRADUATED DROPPER) (CONTAINS ALCOHOL 10%)
DIGOXIN INJECTION USP 0.25 MG PER ML, 2 ML AMPUL
INTERACTION WITH AMPHOTERICIN B: HYPOKALEMIA MAY INCREASE DIGITALIS TOXICITY.
WITH CHLORTHALIDONE: HYPOKALEMIA RESULTS OF DIURETIC THERAPY WILL

-CONTINUED- DIGOXIN USP
ACCENTUATE CARDIAC TOXICITY TO DIGITALIS GLYCOSIDES.
WITH CHOLESTYRAMINE: HYPOKALEMIA MAY INCREASE DIGITALIS TOXICITY.
WITH ETHACRYNIC ACID: HYPOKALEMIA RESULTS OF DIURETIC THERAPY WILL
ACCENTUATE CARDIAC TOXICITY TO DIGITALIS GLYCOSIDES.
WITH FUROSEMIDE: HYPOKALEMIA RESULTS OF DIURETIC THERAPY WILL
ACCENTUATE CARDIAC TOXICITY TO DIGITALIS GLYCOSIDES.
WITH PROPANTHELINE: SLOW PASSAGE OF DIGITALIS GLYCOSIDES THROUGH
GI TRACT TO INCREASE ABSORPTION AND POSSIBLY INCREASE TOXICITY.
WITH PROPRANOLOL: COMBINED USE MAY INCREASE BRADYCARDIA.
WITH SYMPATHOMIMETIC AMINES: ADDITIVE EFFECT TO INCREASE TENDENCY FOR
ARRHYTHMIAS.
WITH THIAZIDE DIURETICS: HYPOKALEMIA RESULTS OF DIURETIC THERAPY WILL
ACCENTUATE CARDIAC TOXICITY TO DIGITALIS GLYCOSIDES.

DIHYDROERGOTAMINE
TRADE NAME D.H.E. 45
CATEGORY 12136 SYMPATHOLYTIC -ADRENERGIC BLOCKING- AGENT
REGIMEN IM - INITAILLY 1 MG, REPEATED AT 1 HOUR INTERVALS TO A TOTAL OF 3 MG.
IF DESIRED, THE IV ROUTE MAY BE USED TO A TOTAL OF 2 MG.
DOSAGE FORM DIHYDROERGOTAMINE MESYLATE 1 MG PER ML, 1 ML AMPULE *D.H.E. 45*

DILTIAZEM
TRADE NAME CARDIZEM
CATEGORY 24112 VASODILATING AGENT
REGIMEN INITIALLY 30 MG FOUR TIMES A DAY, BEFORE MEALS AND AT BEDTIME
INCREASE DOSAGE GRADUALLY TO 240 MG DAILY OR UNTIL OPTIMUM RESPONSE
DOSAGE FORM DILTIAZEM TABLETS 60 MG
NOTE DILTIAZEM IS A SLOW CHANNEL INHIBITOR.

DIOCTYL CALCIUM SULFOSUCCINATE
TRADE NAME DORIDAN
CATEGORY 56112 CATHARTICS AND LAXATIVES (FECAL SOFTENER)
DOSAGE FORM DIOCTYL CALCIUM SULFOSUCCINATE WITH DANTHRON *DORIDAN*
EACH CAPSULE CONTAINS:
DIOCTYL CALCIUM SULFOSUCCINATE 60 MG
DANTHRON 50 MG

DIOCTYL SODIUM SULFOSUCCINATE NF
TRADE NAME COLACE
CATEGORY 56112 CATHARTICS AND LAXATIVES (FECAL SOFTENER)
REGIMEN ADULT- 50-500 MG DAILY.
PEDIATRIC, CHILDREN 6-12 YRS- 40-120 MG DAILY.
PEDIATRIC, CHILDREN 3-6 YRS- 20-60 MG DAILY.
PEDIATRIC, CHILDREN UNDER 3 YRS- 10-40 MG DAILY.
PEDIATRICS 3 MG TO 5 MG PER KG BODY WT. DAILY IN THREE DIVIDED DOSES.
DOSAGE FORM DIOCTYL SODIUM SULFOSUCCINATE CAPSULES 100 MG
DIOCTYL SODIUM SULFOSUCCINATE SOLUTION 1%, 10 MG PER ML
PEDIATRIC DROPS, 30 ML *COLACE LIQUID*

DIPHENHYDRAMINE HYDROCHLORIDE USP
TRADE NAME BENADRYL
CATEGORY 4100 ANTIHISTAMINE
52128 MOUTHWASHES AND GARGLES
REGIMEN 25-50 MG 3-4 TIMES A DAY. HYPNOTIC- 50-100 MG AT BEDTIME.

-CONTINUED- DIPHENHYDRAMINE HYDROCHLORIDE USP
ORAL: CHILDREN UP TO 12 YEARS- 5 MG PER KG DAILY IN 3 TO 4 DIVIDED DOSE
PARENTERAL, 50 MG IV OR IM.
DOSAGE FORM DIPHENHYDRAMINE HYDROCHLORIDE CAPSULES USP 25 MG
DIPHENHYDRAMINE HYDROCHLORIDE CAPSULES USP 50 MG
DIPHENHYDRAMINE HYDROCHLORIDE ELIXIR USP 12.5 MG PER 5 ML
(14% ALCOHOL) 120 ML *BENADRYL ELIXIR*
DIPHENHYDRAMINE HYDROCHLORIDE INJECTION USP, 50 MG PER ML
IN A 1 ML SYRINGE UNIT.
INTERACTION WITH ANTICHOLINERGICS: ADDITIVE ANTICHOLINERGIC EFFECT.
WITH ANTIDEPRESSANTS, TRICYCLIC: ADDITIVE ANTICHOLINERGIC EFFECT.
WITH CNS DEPRESSANTS: POTENTIATES SEDATION.
WITH PHENOTHIAZINES: ADDITIVE ANTICHOLINERGIC EFFECT.

DIPHENOXYLATE HYDROCHLORIDE
TRADE NAME COLONIL
LOMOTIL
CATEGORY 56108 ANTI-DIARRHEA AGENT
REGIMEN ADULT- 2.5 MG TO 5 MG THREE TO FOUR TIMES A DAY.
DOSAGE FORM DIPHENOXYLATE HYDROCHLORIDE TABLETS 2.5 MG WITH
ATROPINE SULFATE 25 MCG *LOMOTIL TABLETS*
NOTE LOMOTIL IS A SCHEDULE V CONTROLLED MEDICATION.
NO REFILLS ARE AUTHORIZED ON DIPHENOXYLATE PRESCRIPTIONS.

DIPHENYLHYDANTOIN SODIUM USP - SEE PHENYTOIN

DIPYRIDAMOLE
TRADE NAME PERSANTINE
CATEGORY 24112 VASODILATING AGENT
REGIMEN 25-50 MG 2 OR 3 TIMES DAILY BEFORE MEALS
DOSAGE FORM DIPYRIDAMOLE TABLETS 25 MG

DISALCID - SEE SALSALATE

DISOPYRAMIDE PHOSPHATE
TRADE NAME NORPACE
CATEGORY 24104 CARDIAC DRUG
REGIMEN ORAL- 300 MG INITIALLY, FOLLOWED BY 150 MG EVERY SIX HOURS,
400 TO 800 MG PER DAY.
DOSAGE FORM DISOPYRAMIDE PHOSPHATE CAPSULES 150 MG
NOTE HYPOGLYCEMIC REACTIONS HAVE BEEN REPORTED:
WITH ANTI-CHOLINERGIC DRUGS.

DISULFIRAM
TRADE NAME ANTABUSE
CATEGORY 92100 UNCLASSIFIED AGENT
REGIMEN 500 MG PER DAY FOR 2-3 WEEKS, MAINTENANCE 250 MG DAILY
NOTE: **ALCOHOL IS CONTRAINDICATED**
DOSAGE FORM DISULFIRAM TABLETS 250 MG
CAUTIONS DISULFIRAM MAY CAUSE SHOCK, MYOCARDIAL INFARCTION, CONFUSION
DISORIENTATION, AND PSYCHOSIS.
INTERACTION WITH ALCOHOL: INHIBITS INTERMEDIARY METABOLISM OF ALCOHOL TO PRODUCE
DANGEROUS, WELL DOCUMENTED REACTIONS.
WITH PHENYTOIN: INHIBITS METABOLISM OF PHENYTOIN
RESULTING IN INCREASED BLOOD LEVELS.

-CONTINUED- DISULFIRAM
WITH ISONIAZID: ALTERS CATECHOLAMINE METABOLISM TO PRODUCE PSYCHOTIC EPISODES, ATAXIA.
WITH METRONIDAZOLE: POSSIBLE TOXIC PSYCHOSIS.
WITH PARALDEHYDE: ENZYME INHIBITION MAY PRODUCE ANTABUSE-LIKE REACTION.
WITH WARFARIN: INHIBITS METABOLISM

DONNATAL - SEE BELLADONNA AND PHENOBARBITAL

DOPAMINE HYDROCHLORIDE
TRADE NAME INTROPIN
CATEGORY 12:12 SYMPATHOMIMETIC -ADRENERGIC- AGENT
REGIMEN 400-800 MCG PER ML IN IV SOLUTION
NOTE: THIS IS A POTENT DRUG WHICH MUST BE DILUTED BEFORE USE.
DOSAGE FORM DOPAMINE HYDROCHLORIDE INJECTION 40 MG PER ML, 5 ML
NOTE ANTIDOTE FOR PERIPHERAL ISCHEMIA CAUSED BY DOPAMINE ADMINISTRATION. TO PREVENT SLOUGHING AND NECROSIS IN ISCHEMIC AREAS, THE AREA SHOULD BE INFILTRATED AS SOON AS POSSIBLE WITH 10 TO 15 ML OF SALINE SOLUTION CONTAINING FROM 5 TO 10 MG OF REGITINE (BRAND OF PHENTOLAMINE).
POTENT DRUG, DILUTE BEFORE USE.
AVAILABLE ONLY FROM CRASH CART.

DOXEPIN HYDROCHLORIDE
TRADE NAME ADAPIN
SINEQUAN
CATEGORY 28:16.04 ANTIDEPRESSANT
DOSAGE FORM DOXEPIN HYDROCHLORIDE CAPSULES 25 MG
NOTE USE AUTHORIZED FOR PSYCHIATRY, CARDIOLOGY AND FAMILY PRACTICE SVCS.
CAUTIONS DOXEPIN MAY CAUSE DROWSINESS.
ALCOHOL SHOULD NOT BE CONSUMED WHILE TAKING DOXEPIN.
INTERACTION WITH BARBITURATES: INDUCTION OF MICROSOMAL ENZYMES TO DECREASE ANTIDEPRESSANT EFFECT.
WITH GUANETHIDINE: TARGET SITE BLOCKAGE ANTAGONIZES ANTIHYPERTENSIVE EFFECT TO INCREASE HYPERTENSION.
WITH MAOI'S: POSSIBLE HYPERPYREXIA, CONVULSIONS.
WITH SYMPATHOMIMETIC AMINES: INHIBITION OF NOREPINEPHRINE UPTAKE BY NEURON CAN PRODUCE HYPERTENSIVE CRISIS.

DRALAZINE - SEE HYDRALAZINE

DRAMAMINE - SEE DIMENHYDRINATE

DRIXORAL - SEE DEXBROMPHENIRAMINE AND/OR PSEUDOEPHEDRINE

DULCOLAX - SEE BISACODYL

DUMONE - SEE METHYLTESTOSTERONE

DUVOID - SEE BETHANECHOL CHLORIDE

DV CREAM - SEE DIENESTROL

DYAZIDE - SEE HYDROCHLORTHIAZIDE AND/OR TRIAMTERENE

DYRENIUM - SEE TRIAMTERENE

EC-ASA - SEE ASPIRIN (ENTERIC COATED)

ECOTRIN - SEE ASPIRIN USP

EDROPHONIUM CHLORIDE USP
TRADE NAME TENSILON
CATEGORY 36:56 DIAGNOSTIC AGENT FOR MYASTHENIA GRAVIS
REGIMEN PARENTERAL, IV: 10 MG (MAXIMUM DOSE OF 40 MG)
DOSAGE FORM EDROPHONIUM CHLORIDE 10 MG PER ML, 1 ML AMPULE

E.E.S. - SEE ERYTHROMYCIN

EFUDEX - SEE FLUOROURACIL

ELAVIL - SEE AMITRIPTYLINE

ELIXICON - SEE THEOPHYLLINE

ELIXIR TERPIN HYDRATE WITH CODEINE - SEE TERPIN HYDRATE NF

ELIXOPHYLLIN SR - SEE THEOPHYLLINE

ENDEP - SEE AMITRIPTYLINE

ENEMA - SEE MINERAL OIL AND/OR SODIUM PHOSPHATE

EPHEDRINE NF
TRADE NAME EPHEDRINE
CATEGORY 12:12 SYMPATHOMIMETIC -ADRENERGIC- AGENT.
REGIMEN ORAL, 25 MG EVERY 4 HOURS
DOSAGE FORM EPHEDRINE SULFATE CAPSULES USP 25 MG
EPHEDRINE SULFATE INJECTION NF 25 MG PER ML, 1 ML AMPUL
INTERACTION WITH SYMPATHOMIMETIC AGENTS: ADDITIVE EFFECT.
WITH MAO INHIBITORS: POTENTIATE THE PRESSOR EFFECT.

EPIFRIN - SEE EPINEPHRINE

EPINEPHRINE (SYMPATHOMIMETIC)
TRADE NAME ADRENALIN
SUSPHRINE
CATEGORY 12:12 SYMPATHOMIMETIC -ADRENERGIC- AGENT.
REGIMEN PARENTERAL, 500 MCG, MAY BE REPEATED EVERY FOUR HOURS.
DOSAGE FORM EPINEPHRINE INJECTION USP 1:1000, 1 ML AMPUL
EPINEPHRINE INJECTION USP 1:1000 IN 1 ML TUREX
EPINEPHRINE SUSPENSION AQUEOUS 5 MG PER ML-1:200, 5 ML VIAL *SUSPHRI
EPINEPHRINE INJECTION 1:1C,000 (0.1 MG PER ML) PREFILLED DISPOSABLE SYRINGE WITH 1.5 INCH, 21 GAUGE NEEDLE, 10 ML WITH A 3 1/2 INCH, 18 GAUGE NEEDLE
NOTE DISPOSABLE SYRINGE NEEDLE UNIT IS AVAILABLE IN CPR KITS.

EPINEPHRINE (MYDRIATIC)
TRADE NAME EPIFRIN
CATEGORY 52124 MYDRIATIC
REGIMEN OPHTHALMIC, 1 TO 2 DROPS IN EYE(S) ONCE OR TWICE A DAY.
DOSAGE FORM EPINEPHRINE HYDROCHLORIDE OPHTHALMIC SOLUTION 1%, 15 ML *EPIFRIN*
EPINEPHRINE HYDROCHLORIDE OPHTHALMIC SOLUTION 2%, 15 ML *EPIFRIN*

EPSON SALTS - SEE MAGNESIUM SULFATE

ERGOTAMINE TARTRATE USP
TRADE NAME CAFERGOT
CAFERGOT PB
GYNERGEN
CATEGORY 12136 SYMPATHOLYTIC-ADRENERGIC BLOCKING-AGENT
REGIMEN ORAL: FOR MIGRAINE, 2 MG FOLLOWED BY 1 MG EVERY ONE-HALF HOUR,
FOR A TOTAL OF NOT MORE THAN 6 MG PER DAY, OR 10 MG PER WEEK.
PARENTERAL: 0.5 ML (250 MCG / 0.25 MG) AT ONSET OF ATTACK
REPEATED TWICE AT HALF HOUR INTERVALS.
DOSAGE FORM ERGOTAMINE TARTRATE TABLETS USP 1 MG *GYNERGEN*
ERGOTAMINE TARTRATE AND CAFFEINE TABLETS *CAFERGOT*
EACH TABLET CONTAINS:
ERGOTAMINE TARTRATE 1 MG
CAFFEINE 100 MG
CAFERGOT-PB
EACH SUPPOSITORY CONTAINS:
ERGOTAMINE TARTRATE 2 MG
CAFFEINE 100 MG
BELLADONNA ALKALOIDS AS MALEATES 250 MCG
PENTOBARBITAL SODIUM 60 MG

ERGOTRATE - SEE ERGONOVINE MALEATE

ERYTHROMYCIN (SYSTEMIC)
TRADE NAME ERYTHROCIN
CATEGORY 8:12.12 ERYTHROMYCIN
REGIMEN ADULT: 250 MG EVERY 6 HRS IN MODERATE INFECTIONS, 500 MG-1 GM
EVERY 6 HRS IN SEVERE INFECTIONS.
PEDIATRIC: 30 TO 50 MG PER KG PER DAY IN 3-4 DIVIDED DOSES.
FOR MORE SEVERE INFECTIONS DOSAGE MAY BE DOUBLED.
DOSAGE FORM ERYTHROMYCIN BASE TABLETS 250 MG *E-MYCIN*ERYTHROMYCIN BASE FILMTABS*
ERYTHROMYCIN LACTOBIONATE INJECTION USP, 1 GM VIAL *ERYTHROCIN I.V.*
ERYTHROMYCIN ETHYLSUCCINATE SUSPENSION, 200 MG PER 5 ML

ERYTHROMYCIN (TOPICAL)
TRADE NAME STATICIN
CATEGORY 84104.04 SKIN AND MUCOUS MEMBRANE ANTIBIOTIC
REGIMEN TOPICAL: APPLY EACH MORNING AND EVENING TO ACNE AFFECTED AREAS
DOSAGE FORM ERYTHROMYCIN TOPICAL SOLUTION 1.5%, 60 ML *STATICIN*

ERYTHROMYCIN - SULFISOXAZOLE
TRADE NAME PEDIAZOLE
CATEGORY 8:40 OTHER ANTI-INFECTIVES
REGIMEN ONE TEASPOONFUL PER 9 POUNDS (4 KG) DAILY IN 4 EQUALLY DIVIDED DOSES
FOR TEN DAYS.
DOSAGE FORM ERYTHROMYCIN 200 MG AND SULFISOXAZOLE 600 MG/5 ML, 100 ML *PEDIAZOLE*

NOTE PEDIAZOLE SHOULD NOT BE GIVEN TO INFANTS UNDER 2 MONTHS OF AGE.

ESIDRIX - SEE HYDROCHLOROTHIAZIDE

ESKALITH - SEE LITHIUM

ESTAR - SEE COAL TAR

ESTINYL - SEE ETHINYL ESTRADIOL

ESTROGENIC SUBSTANCES, CONJUGATED
TRADE NAME PREMARIN
CATEGORY 68:16 ESTROGENS
REGIMEN ORAL, 0.625 TO 1.25 MG PER DAY.
DOSAGE FORM CONJUGATED ESTROGENIC SUBSTANCE TABLETS 0.3 MG
CONJUGATED ESTROGENIC SUBSTANCE TABLETS 0.625 MG
CONJUGATED ESTROGENIC SUBSTANCE TABLETS 1.25 MG

ETH WITH CODEINE - SEE TERPIN HYDRATE

ETHAMBUTOL
TRADE NAME MYAMBUTOL
CATEGORY 8:16 ANTITUBERCULAR
REGIMEN 15 TO 25 MG PER KG
DOSAGE FORM ETHAMBUTOL HYDROCHLORIDE TABLETS 400 MG

ETHANOL - SEE ALCOHOL

ETHINYL ESTRADIOL USP
TRADE NAME ESTINYL
CATEGORY 68:12 CONTRACEPTIVES
68:16 ESTROGENS
REGIMEN ORAL, FOR HYPO-OVARIANISM: 0.05 MG THREE TIMES DAILY
DURING FIRST HALF OF CYCLIC ESTROGEN-PROGESTERONE CYCLE.
FOR MENOPAUSE 20 TO 40 MCG ONE TO THREE TIMES DAILY.
DOSAGE FORM ETHINYL ESTRADIOL TABLETS USP 0.02 MG (20 MCG)

ETHINYL ESTRADIOL COMBINATIONS
TRADE NAME DEMULEN
LO/OVRAL
OVRAL
CATEGORY 68:12 CONTRACEPTIVES
REGIMEN ONE TABLET DAILY FROM THE 5TH THROUGH 25TH DAYS
OF MENSTRUAL CYCLE FOLLOWED BY 7 DAYS WITHOUT MEDICATION
DOSAGE FORM ETHINYL ESTRADIOL AND ETHYNODIOL DIACETATE TABLETS
WITH 21 TABLETS *DEMULEN-21*
EACH TABLET CONTAINS:
ETHINYL ESTRADIOL 50 MCG
ETHYNODIOL DIACETATE 1 MG
ETHINYL ESTRADIOL AND NORGESTREL TABLETS
WITH 21 TABLETS *OVRAL-21*
EACH TABLET CONTAINS:
ETHINYL ESTRADIOL 50 MCG
NORGESTREL 500 MCG

-CONTINUED- ETHINYL ESTRADIOL COMBINATIONS
ETHINYL ESTRADIOL AND NORGESTREL TABLETS
WITH 21 TABLETS *LO-OVRAL-21*
ETHINYL ESTRADIOL 30 MCG
NORGESTREL 500 MCG

ETHOSUXIMIDE
TRADE NAME ZARONTIN
CATEGORY 28112 ANTICONVULSANTS
REGIMEN ORAL, INITIAL 250 MG TWICE DAILY
DOSAGE FORM ETHOSUXIMIDE CAPSULES 250 MG
ETHOSUXIMIDE SYRUP 250 MG PER 5 ML
CAUTIONS ETHOSUXIMIDE MAY CAUSE DROWSINESS.
ALCOHOL SHOULD NOT BE CONSUMED WHILE TAKING ETHOSUXIMIDE.

ETHYL ALCOHOL - SEE ALCOHOL

ETHYNODIOL DIACETATE
TRADE NAME DEMULEN
CATEGORY 68112 CONTRACEPTIVES
REGIMEN ONE TABLET ON THE FIFTH DAY OF CYCLE-CONTINUE FOR
21 DAYS, STOP FOR SEVEN DAYS AND REPEAT.
DOSAGE FORM ETHYNODIOL DIACETATE 1 MG WITH ETHINYL ESTRADIOL 50 MCG *DEMULEN*
NOTE SEE ETHINYL ESTRADIOL, NORETHINDRONE, AND NORETHYNODREL
FOR OTHER CONTRACEPTIVE TABLETS.
MAXIMUM QUANTITY DISPENSED LIMITED TO 3 MONTH SUPPLY WITH 3 REFILLS.

ETRAFON - SEE PERPHENAZINE

EURAX - SEE CROTAMITON

FAT EMULSION
TRADE NAME LIPOSYN
CATEGORY 40120 CALORIC AGENTS
REGIMEN ADULT- NO MORE THAN 25 GM PER KG OF BODY WEIGHT PER DAY.
PEDIATRIC- NO MORE THAN 4 GM PER KG OF BODY WEIGHT PER DAY.
DOSAGE FORM FAT EMULSION IV 10% *LIPOSYN 10%* (1.1 CALORIES PER ML)
EACH 500 ML CONTAINS:
SAFFLOWER OIL 10.0 %
EGG PHOSPHATIDES 1.2 %
GLYCERIN 2.5 %
IN A SOLUTION CONTAINING:
LINOLEIC FATTY ACID 77.0 %
OLEIC FATTY ACID 13.0 %
PALMITIC FATTY ACID 7.0 %
STEARIC ACID 2.5 %
NOTE NO OTHER PRODUCT SHOULD BE MIXED WITH THIS PRODUCT.
FOR INPATIENT USE ONLY.

FELDENE - SEE PIROXICAM

FENTANYL
TRADE NAME INNOVAR
SUBLIMAZE
CATEGORY 28108 ANALGESIC

-CONTINUED- FENTANYL
DOSAGE FORM FENTANYL INJECTION 50 MCG PER ML, 2 ML AMPULE *SUBLIMAZE*
FENTANYL CITRATE AND DROPERIDOL INJECTION, 2 ML AMPULE *INNOVAR*
EACH ML CONTAINS:
FENTANYL *0.0 MCG
DROPERIDOL 2.5 MG
NOTE SCHEDULE II CONTROLLED MEDICATIONS.

FER-IN-SOL - SEE FERROUS SULFATE

FERROUS SULFATE USP
TRADE NAME FER-IN-SOL
CATEGORY 20104.04 IRON PREPARATIONS
REGIMEN 250 MG TO 1.5 GM IN 3 DIVIDED DOSES
DOSAGE FORM FERROUS SULFATE TABLETS 325 MG (65 MG OF ELEMENTAL IRON)
FERROUS SULFATE CONCENTRATED SOLUTION 125 MG PER ML, 50 ML *FER-IN-SOL*
125 MG OF ELEMENTAL IRON PER ML) WITH CALIBRATED DROPPER

FIORINAL - SEE ASPIRIN

5-FU - SEE FLUOROURACIL

FLAGYL - SEE METRONIDAZOLE

FLAVOXATE
TRADE NAME URISPAS
CATEGORY 86100 SPASMOLYTIC AGENT
REGIMEN PATIENT OVER 12 YRS OLD- 100-200 MG 3-4 TIMES DAILY
DOSAGE FORM FLAVOXATE TABLET 100 MG *URISPAS*

FLEET ENEMA - SEE SODIUM PHOSPHATE

FLEET OIL RETENTION ENEMA - SEE MINERAL OIL

FLEXERIL - SEE CYCLOBENZAPRINE HCL

FLUOCINOLONE ACETONIDE
TRADE NAME SYNALAR
CATEGORY 84106 SKIN AND MUCOUS MEMBRANE ANTI-INFLAMMATORY AGENT
DOSAGE FORM FLUOCINOLONE ACETONIDE SOLUTION IN PROPYLENE GLYCOL 0.01%, 20 ML

FLUOCINONIDE
TRADE NAME LIDEX
TOPSYN GEL
CATEGORY 84106 SKIN AND MUCOUS MEMBRANE ANTI-INFLAMMATORY AGENT
REGIMEN APPLY A SMALL AMOUNT TOPICALLY TO AFFECTED AREA 2 TO 4 TIMES DAILY.
DOSAGE FORM FLUOCINONIDE CREAM 0.05% 60 GM TUBE *LIDEX*
FLUOCINONIDE CREAM 0.05%, 15 GM TUBE *LIDEX*
FLUOCINONIDE GEL 0.05% 15 GM TUBE *TOPSYN GEL*
FLUOCINONIDE OINTMENT 0.05% 15 GM TUBE *LIDEX*
FLUOCINONIDE OINIMENT 0.05%, 60 GM TUBE *LIDEX*

FLUORIDE GEL - SEE STANNOUS FLUORIDE

FLUOR-I-STRIP - SEE FLUORESCEIN, SODIUM

FLUOROMETHOLONE (EENT)
TRADE NAME FML LIQUIFILM
CATEGORY 52:08 EENT ANTI-INFLAMMATORY
REGIMEN INSTILL 1 TO 2 DROPS INTO CONJUNCTIVAL SAC TWO TO FOUR TIMES DAILY.
DOSAGE FORM FLUOROMETHOLONE OPHTHALMIC SUSPENSION, 10 ML *FML LIQUIFILM*
CONTAINS:
FLUOROMETHOLONE 0.1%
POLYVINYL ALCOHOL 1.4%

FLUOROURACIL (SYSTEMIC)
CATEGORY 10:00 ANTINEOPLASTIC AGENT
REGIMEN PARENTERAL IV: INITIAL 15 MG PER KG OF BODY WEIGHT DAILY FOR 4 DAYS.
DOSAGE FORM FLUOROURACIL INJECTION 50 MG PER ML, 10 ML AMPULE
INTERACTION WITH BCG VACCINE, CHOLERA VACCINE, INFLUENZA VIRUS VACCINE, MEASLES MUMPS AND RUBELLA VACCINE, MEASLES VIRUS VACCINE LIVE, MUMPS VACCINE, MUMPS VIRUS VACCINE LIVE, POLIO VIRUS VACCINE LIVE, AND RABIES VACCINE: IMMUNOSUPPRESSANTS IMPAIR THE PATIENTS ABILITY TO PRODUCE AN ANTIBODY TITER IN RESPONSE TO AN ANTIGEN CHALLENGE. USE OF LIVE OR ATTENUATED VACCINES MAY RISK ACTUAL INFECTION WITH THE ANTIGENIC AGENT.

FLUOROURACIL (TOPICAL)
TRADE NAME EFUDEX
5FU
CATEGORY 84:36 SKIN AND MUCOUS MEMBRANE MISCELLANEOUS AGENT
DOSAGE FORM FLUOROURACIL TOPICAL CREAM 5%, 25 GM TUBE *EFUDEX*

FLURANDRENOLIDE
TRADE NAME CORDRAN
CATEGORY 84:06 SKIN AND MUCOUS MEMBRANE ANTI-INFLAMMATORY AGENT
DOSAGE FORM FLURANDRENOLIDE OINTMENT 0.05%, 15 GM TUBE *CORDRAN*

FLURAZEPAM HYDROCHLORIDE
TRADE NAME DALMANE
CATEGORY 28:24 SEDATIVES AND HYPNOTICS
DOSAGE FORM FLURAZEPAM HYDROCHLORIDE CAPSULES 30 MG
NOTE QUANTITY IS LIMITED TO A 30 DAY SUPPLY.
FLURAZEPAM HYDROCHLORIDE PRESCRIPTIONS ARE NOT REFILLABLE.

FML LIQUIFILM - SEE FLUOROMETHOLONE

FOLIC ACID USP
TRADE NAME FOLVITE
CATEGORY 88:08 VITAMIN B COMPLEX
DOSAGE FORM FOLIC ACID TABLETS 0.1 MG (100 MCG)
FOLIC ACID INJECTION, 1 MG PER ML, 1 ML AMPULE

FORMALDEHYDE
TRADE NAME FORMALIN
CATEGORY 92:00 MISCELLANEOUS AGENTS
DOSAGE FORM FORMALDEHYDE SOLUTION 10%

FOSTEX - SEE SULFUR AND/OR SALICYLIC ACID

FREAMINE II - SEE AMINO ACID, CRYSTALLINE

FUROSEMIDE
TRADE NAME LASIX
CATEGORY 40:28 DIURETIC
REGIMEN ORAL, 40 TO 80 MG GIVEN AS A SINGLE DOSE IN THE MORNING.
ADULT IM OR IV- 20 TO 40 MG AS A SINGLE DOSE.
DOSAGE FORM FUROSEMIDE TABLETS 40 MG *LASIX*
FUROSEMIDE INJECTION 10 MG PER ML, 2 ML AMPUL
FUROSEMIDE INJECTION 10 MG PER ML, 10 ML AMPUL

GAMMA BENZENE HEXACHLORIDE - SEE BENZENE HEXACHLORIDE, GAMMA

GANTRISIN - SEE SULFISOXAZOLE

GARAMYCIN - SEE GENTAMICIN SULFATE

GAVISCON - SEE ALUMINUM HYDROXIDE

GEL-KAM - SEE STANNOUS FLUORIDE

GEMFIBROZIL
TRADE NAME LOPID
CATEGORY 24:06 ANTILIPEMIC AGENT
REGIMEN ORAL: 900 MG TO 1500 MG DAILY IN 2 DIVIDED DOSES.
GIVEN 30 MINUTES BEFORE MORNING AND EVENING MEALS.
DOSAGE FORM GEMFIBROZIL CAPSULES 300 MG *LOPID*

GENTAMICIN SULFATE
TRADE NAME GARAMYCIN
CATEGORY 8:12.02 AMINOGLYCOSIDES
REGIMEN 3-5 MG/KG TOTAL DAILY DOSE IN DIVIDED DOSES FOR 7-10 DAYS
NOTE: GENTAMICIN INFUSIONS SHOULD BE RUN VERY SLOWLY (AT LEAST 30 MINUTES) TO AVOID NEPHROTOXICITY AND VIII CRANIAL NERVE DAMA
DOSAGE FORM GENTAMICIN SULFATE INJECTION 40 MG PER ML, 2 ML VIAL
GENTAMICIN SULFATE INJECTION 10 MG PER ML, 2 ML VIAL
INTERACTION WITH CEPHALORIDINE: POSSIBLE NEPHROTOXICITY.
WITH CEPHALOTHIN: POSSIBLE NEPHROTOXICITY.
WITH ETHACRYNIC ACID: POSSIBLE HEARING LOSS.
WITH GALLAMINE: NEUROMUSCULAR BLOCKADE.
WITH PANCURONIUM: NEUROMUSCULAR BLOCKADE.
WITH POLYMYXIN B: ADDITIVE FOR NEPHROTOXICITY.
WITH SUCCINYLCHOLINE: NEUROMUSCULAR BLOCKADE.
WITH TUBOCURARINE: NEUROMUSCULAR BLOCKADE.

GENTAMICIN SULFATE (EENT)
TRADE NAME GARAMYCIN
CATEGORY 52:04.04 EENT ANTIBIOTIC
DOSAGE FORM GENTAMICIN SULFATE OPHTHALMIC SOLUTION 0.3%, 5 ML

GENTAMICIN SULFATE (TOPICAL)
TRADE NAME GARAMYCIN
CATEGORY 84:04.04 SKIN AND MUCOUS MEMBRANE ANTIBIOTIC
DOSAGE FORM GENTAMICIN TOPICAL CREAM 0.1%, 15 GM

GENTIAN VIOLET USP
TRADE NAME HYVA

-CONTINUED- GENTIAN VIOLET USP
CATEGORY 84:04.08 SKIN AND MUCOUS MEMBRANE FUNGICIDE
DOSAGE FORM GENTIAN VIOLET SOLUTION USP 1%, 30 ML

GG - SEE GUAIFENESIN

GG/DM - SEE GUAIFENESIN (WITH DEXTROMETHORPHAN)

GLAUCON - SEE EPINEPHRINE

GLUCAGON INJECTION USP
CATEGORY 68:20 INSULIN AND ANTI-DIABETIC AGENTS
REGIMEN 0.5 TO 1.0 MG GIVEN SC, IM, OR IV
DOSAGE FORM GLUCAGON INJECTION USP 10 MG VIAL

GLUCOSE OXIDASE REAGENT (BLOOD TESTS)
TRADE NAME DEXTROSTIX
CATEGORY 36:26 DIAGNOSTIC AGENT FOR DIABETES MELLITUS
DOSAGE FORM GLUCOSE OXIDASE REAGENT STRIPS FOR BLOOD GLUCOSE DETECTION
*CHEMSTRIP BG*DEXTROSTIX*GLUCOSCAN*VISIDEX*VISIDEX II*
BOTTLES OF 25*S

GLUCOSE OXIDASE REAGENT (URINE TESTS)
TRADE NAME CLINITEST
TES-TAPE
CATEGORY 36:88 URINE CONTENTS - DIAGNOSTIC AGENTS
DOSAGE FORM GLUCOSE OXIDASE REAGENT TAPE *TES-TAPE*
GLUCOSE OXIDASE TABLETS FOR DETECTION OF URINE GLUCOSE *CLINITEST*

GLYCERYL GUAIACOLATE - SEE GUAIFENESIN

GLYCERYL TRINITRATE - SEE NITROGLYCERIN

GLYCOPYRROLATE
TRADE NAME ROBINUL
CATEGORY 12:08 PARASYMPATHOLYTIC
REGIMEN ORAL-INITIALLY 1-2 MG 3 TIMES A DAY AND AT BEDTIME.
MAINTENANCE, 1 MG TWICE DAILY.
DOSAGE FORM GLYCOPYRROLATE INJECTION 0.2 MG PER ML, 20 ML
GLYCOPYRROLATE TABLETS 1 MG
CAUTIONS GLYCOPYRROLATE MAY CAUSE SEDATION.

GRIFULVIN V - SEE GRISEOFULVIN

GRISEOFULVIN USP
TRADE NAME FULVICIN-U/F
FULVICIN P/G
GRIFULVIN V
GRIS-PEG
CATEGORY 8:12.04 ANTIFUNGAL ANTIBIOTIC
REGIMEN MICROSIZE, ADULT: 500 MG DAILY, PEDIATRIC: 10 TO 11 MG PER KILOGRAM
ULTRAMICROSIZED, ADULT: 250 MG DAILY.
ULTRAMICROSIZED, CHILDREN: SEE PRESCRIBING LITERATURE.
NOTE: PATIENT SHOULD BE GIVEN GRISEOFULVIN AFTER A HIGH FAT MEAL
NOTE:ULTRAMICROSIZED GRISEOFULVIN HAS APPROXIMATELY 1.5 TIMES THE

-CONTINUED- GRISEOFULVIN USP
BIOLOGICAL ACTIVITY AS THE MICROSIZE FORMULATIONS.
DOSAGE FORM GRISEOFULVIN ULTRAMICROSIZED TABLETS USP 125 MG *GRIS-PEG*

GRIS-PEG - SEE GRISEOFULVIN, USP

GUAIFENESIN
TRADE NAME BAYTUSSIN
BAYTUSSIN DM
ROBITUSSIN
ROBITUSSIN-DM
CATEGORY 8:00 EXPECTORANT AND COUGH PREPARATION
REGIMEN ADULT: 100 MG TO 200 MG EVERY 2 TO 6 HOURS.
PEDIATRIC- 50-100 MG 3-4 TIMES A DAY AS NEEDED.
DOSAGE FORM GUAIFENESIN SYRUP 100 MG PER 5 ML, 120 ML *BAYTUSSIN* GG *ROBITUSSIN*
GUAIFENESIN 100 MG PER 5 ML, DEXTROMETHORPHAN HYDROBROMIDE 15 MG
120 ML *BAYTUSSIN DM* GG-DM *ROBITUSSIN DM*

GUANETHIDINE SULFATE USP
TRADE NAME ISMELIN
CATEGORY 24:08 HYPOTENSIVE AGENT
REGIMEN ORAL, 10 TO 50 MG DAILY
DOSAGE FORM GUANETHIDINE SULFATE TABLETS USP 10 MG
CAUTIONS GUANETHIDINE MAY CAUSE AZOTEMIA IN RENAL DISEASE, ORTHOSTATIC HYPOTENSION, AND IMPOTENCE.
GUANETHIDINE MAY CAUSE DROWSINESS.
INTERACTION WITH AMITRIPTYLINE: HYPOTENSIVE EFFECT OF GUANETHIDINE ANTAGONIZED BY TRICYCLIC ANTIDEPRESSANTS.
WITH AMPHETAMINE: ANTAGONIZES THE ADRENERGIC BLOCKADE PRODUCED BY GUANETHIDINE.
WITH DESIPRAMINE: HYPOTENSIVE EFFECT OF GUANETHIDINE ANTAGONIZED BY TRICYCLIC ANTIDEPRESSANTS.
WITH DOXEPIN: HYPOTENSIVE EFFECT OF GUANETHIDINE ANTAGONIZED BY TRICYCLIC ANTIDEPRESSANTS.
WITH FURAZOLIDONE: DEPENDS ON ORDER ADMINISTERED: MAOI, THEN GUANETHIDINE MAY RESULT IN HYPERTENSIVE CRISIS. GUANETHIDINE, THEN MAOI MAY RESULT IN REDUCED ANTIHYPERTENSIVE ACTIVITY.
WITH IMIPRAMINE: HYPOTENSIVE EFFECT OF GUANETHIDINE ANTAGONIZED BY TRICYCLIC ANTIDEPRESSANTS.
WITH NORTRIPTYLINE: HYPOTENSIVE EFFECT OF GUANETHIDINE ANTAGONIZED BY TRICYCLIC ANTIDEPRESSANTS.
WITH PARGYLINE: DEPENDS ON ORDER ADMINISTERED: MAOI, THEN GUANETHIDINE MAY RESULT IN HYPERTENSIVE CRISIS. GUANETHIDINE, THEN MAOI MAY RESULT IN REDUCED ANTIHYPERTENSIVE ACTIVITY.
WITH PROTRIPTYLINE: HYPOTENSIVE EFFECT OF GUANETHIDINE ANTAGONIZED BY TRICYCLIC ANTIDEPRESSANTS.
WITH TRANYLCYPROMINE: DEPENDS ON ORDER ADMINISTERED: MAOI, THEN GUANETHIDINE MAY RESULT IN HYPERTENSIVE CRISIS. GUANETHIDINE, THEN MAOI MAY RESULT IN REDUCED ANTIHYPERTENSIVE ACTIVITY.

GYNE-LOTRIMIN - SEE CLOTRIMAZOLE

HALDOL - SEE HALOPERIDOL

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     TRADE NAME  HALDOL
     CATEGORY    28:16.08 TRANQUILIZERS
     REGIMEN     0.5 MG (500 MCG) TO 5 MG TWO OR THREE TIMES DAILY.
     DOSAGE FORM HALOPERIDOL TABLETS 2 MG
                 HALOPERIDOL INJECTION 5 MG PER ML, 1 ML AMPUL
     CAUTIONS    SHOULD HYPOTENSION OCCUR AND A VASOPRESSOR BE REQUIRED: EPINEPHRINE
                   SHOULD  NOT  BE USED.
                 HALOPERIDOL MAY CAUSE DROWSINESS.
                 ALCOHOL SHOULD NOT BE CONSUMED WHILE TAKING HALOPERIDOL.

HEMORRHOIDAL SUPPOSITORIES - SEE BISMUTH COMPOUND

HEMORRHOIDAL HC SUPPOSITORIES - SEE BISMUTH COMPOUND

HEPARIN SODIUM  USP
     TRADE NAME  HEPARIN LOCK FLUSH
                 LIPO-HEPIN
                 PANHEPARIN
     CATEGORY    20:12.04 ANTICOAGULANT
     REGIMEN     NOTE: PROTAMINE SULFATE IS THE ANTIDOTE.
     DOSAGE FORM SODIUM HEPARIN 100 UNITS PER ML, 1 ML SYRINGE/NEEDLE UNIT
                   (50 UNITS PER BOX)
                 TO CLEAR HEPARIN LOCKS - HEPARIN LOCK FLUSH
                 SODIUM HEPARIN INJECTION USP 1000 UNITS PER ML, 10 ML VIAL
                 SODIUM HEPARIN INJECTION 10,000 UNITS PER ML, 2 ML VIAL

HEXABETALIN - SEE PYRIDOXINE

HEXACHLOROPHENE  USP
     TRADE NAME  PHISOHEX
     CATEGORY    84:04.16 SKIN AND MUCOUS MEMBRANE MISCELLANEOUS LOCAL ANTI-INFECTIVE
                 84:20 SKIN AND MUCOUS MEMBRANE DETERGENT
     DOSAGE FORM HEXACHLOROPHENE SOAPLESS SKIN CLEANSER 3%, 150 ML *PHISOHEX*

HEXADROL - SEE DEXAMETHASONE

HISTAMINE PHOSPHATE  USP
     CATEGORY    36:36 DIAGNOSTIC AGENT FOR GASTRIC FUNCTION
                 36:64 DIAGNOSTIC AGENT FOR PHEOCHROMOCYTOMA
     REGIMEN     FOR GASTRIC FUNCTION- 500 MCG TO 2 MG SUBCUTANEOUSLY.
                 FOR PHEOCHROMOCYTOMA- 25-50 MCG HISTAMINE BASE BY IV INFUSION.
     DOSAGE FORM HISTAMINE PHOSPHATE INJECTION 0.55 MG PER ML, 5 ML
                   EQUIVALENT TO 0.2 MG OF HISTAMINE PER ML

HYDRALAZINE HYDROCHLORIDE  NF
     TRADE NAME  APRESOLINE
                 ORALAZINE
     CATEGORY    24:08 HYPOTENSIVE AGENT
     REGIMEN     OUTPATIENT: 10 MG TO 50 MG AFTER MEALS AND AT BEDTIME.
                 INPATIENT, ORAL- 25 MG EVERY 6 HOURS.
                 INPATIENT, PARENTERAL: 20 MG TO 40 MG IV OR IM EVERY 4 TO 6 HOURS.
     NOTE        DAILY INPATIENT DOSE UP TO 400 MG PER DAY.
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-CONTINUED-      HYDRALAZINE HYDROCHLORIDE  NF
     DOSAGE FORM HYDRALAZINE HYDROCHLORIDE TABLETS NF 25 MG                    *
                 HYDRALAZINE HYDROCHLORIDE INJECTION NF 20 MG PER ML.          *
                   1 ML AMPULE, IM OR IV.
     CAUTIONS    HYDRALAZINE MAY CAUSE THE PRECIPITATION OF ANGINA.
                 HYDRALAZINE MAY CAUSE DROWSINESS.

HYDROCHLOROTHIAZIDE  USP
     TRADE NAME  DYAZIDE
                 ESIDRIX
                 HYDRODIURIL
                 ORETIC
     CATEGORY    40:28 DIURETIC
     REGIMEN     25 MG TO 100 MG ONCE OR TWICE DAILY.
     DOSAGE FORM HYDROCHLOROTHIAZIDE TABLETS USP 50 MG                         *

HYDROCORTISONE (EENT)
     TRADE NAME  CORTISPORIN
     CATEGORY    52:08 EENT ANTI-INFLAMMATORY AGENT
     DOSAGE FORM HYDROCORTISONE AND ANTIBIOTICS COMPOUND OPHTHALMIC OINTMENT, 3.5 GM
                                                          *CORTISPORIN*
                   EACH GM CONTAINS:
                     HYDROCORTISONE                          10 MG
                     BACITRACIN, ZINC                       400 UNITS
                     NEOMYCIN SULFATE                         5 MG
                       (EQUIVALENT TO 3.5 MG OF BASE)
                     POLYMYXIN B SULFATE                10,000 UNITS
                     WHITE PETROLATUM                       QS
                 HYDROCORTISONE AND ANTIBIOTIC COMPOUND OPHTHALMIC SUSPENSION,
                   5 ML BOTTLE *CORTISPORIN*
                     EACH ML CONTAINS:
                       HYDROCORTISONE                       10 MG
                       POLYMYXIN B SULFATE            10,000 UNITS
                       NEOMYCIN SULFATE                      5 MG
                 HYDROCORTISONE AND ANTIBIOTICS COMPOUND OTIC SUSPENSION, 10 ML BOTTLE
                   IN A CETYL ALCOHOL, PPG, POLYSORBATE 80 SUSPENSION *CORTISPORIN*
                     EACH ML CONTAINS:
                       HYDROCORTISONE                       10 MG
                       POLYMYXIN B SULFATE            10,000 UNITS
                       NEOMYCIN SULFATE                      5 MG
                         (EQUIVALENT TO 3.5 MG OF NEOMYCIN BASE)
                 HYDROCORTISONE AND ANTIBIOTICS COMPOUND OTIC SOLUTION, 10 ML BOTTLE
                   IN A GLYCERIN, PROPYLENE GLYCOL, ACIDIC SOLUTION *CORTISPORIN*
                     EACH ML CONTAINS:
                       HYDROCORTISONE                       10 MG
                       POLYMYXIN B SULFATE            10,000 UNITS
                       NEOMYCIN SULFATE                      5 MG
                         (EQUIVALENT TO 3.5 MG OF BASE)
     NOTE        CORTISPORIN OPHTHALMIC PREPARATIONS CAN BE USED IN THE EAR.
                 CORTISPORIN OTIC SUSPENSION IS AUTHORIZED FOR TREATMENT
                   OF PERFORATED TYMPANIC MEMBRANE ONLY.

HYDROCORTISONE (SYSTEMIC)
     TRADE NAME  CORTEF
                 SOLU-CORTEF
     CATEGORY    68:04 ADRENAL HORMONE
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-CONTINUED- HYDROCORTISONE (SYSTEMIC)
REGIMEN 60 MG TO 80 MG FOR SEVERE CASES, 50 TO 70 MG FOR MODERATE, AND 40 MG TO 60 MG FOR MILD. ALL DOSAGES ARE GIVEN IN FOUR EQUALLY DIVIDED DOSES WITH MEALS AND AT BEDTIME.
DOSAGE FORM HYDROCORTISONE ACETATE SUSP FOR INJ USP, 25 MG PER ML, 5 ML VIAL
HYDROCORTISONE SODIUM SUCCINATE INJECTION 50 MG PER ML, 2 ML *SOLU-CORTEF-MIX-O-VIAL*
HYDROCORTISONE SODIUM SUCCINATE INJECTION 125 MG PER ML, 2 ML *SOLU-CORTEF-MIX-O-VIAL*
HYDROCORTISONE TABLETS USP 20 MG

HYDROCORTISONE (TOPICAL)
TRADE NAME CORT DOME
CATEGORY 84106 SKIN AND MUCOUS MEMBRANE ANTI-INFLAMMATORY AGENT
REGIMEN TOPICALLY: APPLY A THIN FILM TO AFFECTED AREA ONE TO THREE TIMES DAILY. MASSAGE GENTLY INTO AFFECTED AREAS.
DOSAGE FORM HYDROCORTISONE CREAM 1%, 20 GM TUBE *
HYDROCORTISONE VALERATE CREAM 0.2%, 15 GM *WESTCORT*
HYDROCORTISONE SUSPENSION, DISPOSABLE ENEMA UNIT, 100 MG, 60 ML *CORTENEMA, RECTOID*

HYDRODIURIL - SEE HYDROCHLOROTHIAZIDE

HYDROGEN PEROXIDE USP
CATEGORY 52128 MOUTHWASH AND GARGLE
84104.16 MISCELLANEOUS LOCAL ANTI-INFECTIVES
DOSAGE FORM HYDROGEN PEROXIDE SOLUTION USP 3%, 473 ML
NOTE DILUTE WITH AN EQUAL VOLUME OF WATER BEFORE GARGLING.

HYDROXYCHLOROQUINE SULFATE USP
TRADE NAME PLAQUENIL
CATEGORY 8120 PLASMODICIDE
REGIMEN 200 MG DAILY
DOSAGE FORM HYDROXYCHLOROQUINE SULFATE TABLETS USP 200 MG

HYDROXYPROGESTERONE
TRADE NAME DELALUTIN
CATEGORY 68132 PROGESTOGEN
REGIMEN PARENTERAL, I.M.: 125 MG TO 250 MG 12 DAYS PRIOR TO MENSTRUATION.
DOSAGE FORM HYDROXYPROGESTERONE CAPROATE IN SESAME OIL INJECTION 250 MG PER ML, 5 ML

HYDROXYZINE
TRADE NAME ATARAX
VISTARIL
CATEGORY 28116.08 TRANQUILIZER
REGIMEN ADULT: 25 MG TO 100 MG THREE TO FOUR TIMES DAILY.
DOSAGE FORM HYDROXYZINE HYDROCHLORIDE TABLETS NF 10 MG *ATARAX*
HYDROXYZINE HYDROCHLORIDE TABLETS NF 25 MG *ATARAX*
HYDROXYZINE PAMOATE CAPSULES 50 MG *VISTARIL*
HYDROXYZINE HYDROCHLORIDE SYRUP 10 MG PER 5 ML *ATARAX*
HYDROXYZINE HYDROCHLORIDE INJ. 50 MG PER ML, 10 ML VIAL *VISTARIL* *
CAUTIONS ANTIHISTAMINES MAY CAUSE DROWSINESS.

HYGROTON - SEE CHLORTHALIDONE

HYKINONE - SEE MENADIONE

HYOSCINE - SEE SCOPOLAMINE HYDROBROMIDE

HYPERALIMENTATION - SEE AMINO ACIDS

HYPERSTAT - SEE DIAZOXIDE

IBUPROFEN
TRADE NAME MOTRIN
CATEGORY 28108.04 NONSTEROIDAL ANTI-INFLAMMATORY AGENTS
REGIMEN ORAL: 300 MG TO 600 MG 3 OR 4 TIMES DAILY NOT TO EXCEED 2.4 GM DAILY. TAKE WITH FOOD OR MILK.
DOSAGE FORM IBUPROFEN TABLETS 400 MG *MOTRIN*RUFEN*
IBUPROFEN TABLETS 600 MG *MOTRIN*RUFEN*
NOTE HIGH COST ITEM.
CAUTIONS ASPIRIN CAN DECREASE ANTI-INFLAMMATORY ACTIVITY OF MOTRIN.
ASPIRIN CAN INHIBIT PLATELET AGGREGATION.
ANAPHYLACTOID REACTIONS HAVE OCCURRED IN PATIENTS WITH KNOWN ASPIRIN HYPERSENSITIVITY.
ADVERSE REACTIONS WITH OCCURRENCE GREATER THAN ONE PERCENT:
GASTROINTESTINAL: NAUSEA, PAIN, AND HEARTBURN.
CENTRAL NERVOUS SYSTEM: DIZZINESS AND TINNITUS.
DERMATOLOGIC: RASH.

IDOXURIDINE
TRADE NAME STOXIL
CATEGORY 52104.06 EENT ANTIVIRALS
DOSAGE FORM IDOXURIDINE OPHTHALMIC OINTMENT 0.5%, 1/8 OZ
IDOXURIDINE OPHTHALMIC SOLUTION 0.1%, 15 ML
NOTE STOXIL EYE DROPS MUST BE REFRIGERATED

IN - SEE INSULIN

IRON - SEE IRON DEXTRAN

IPRAMINE HYDROCHLORIDE NF
TRADE NAME JANIMINE
PRESAMINE
TOFRANIL
CATEGORY 28116.04 ANTIDEPRESSANT
REGIMEN INITIAL, INPATIENT: 100 MG TO 300 MG PER DAY IN DIVIDED DOSES.
INITIAL, OUTPATIENT: 75 MG TO 200 MG PER DAY IN DIVIDED DOSES.
MAINTENANCE, INPATIENT AND OUTPATIENT- 50-150 MG DAILY.
DOSAGE FORM IMIPRAMINE HYDROCHLORIDE TABLETS NF 25 MG
CAUTIONS IMIPRAMINE MAY CAUSE DROWSINESS.
ALCOHOL SHOULD NOT BE CONSUMED WHILE TAKING IMIPRAMINE.
INTERACTION WITH BARBITURATES: INDUCTION OF MICROSOMAL ENZYMES TO DECREASE ANTIDEPRESSANT EFFECT.
WITH GUANETHIDINE: TARGET SITE BLOCKAGE ANTAGONIZES ANTIHYPERTENSIVE EFFECT TO INCREASE HYPERTENSION.
WITH MAOI'S: POSSIBLE HYPERPYREXIA, CONVULSIONS.
WITH SYMPATHOMIMETIC AMINES: INHIBITION OF NOREPINEPHRINE UPTAKE BY NEURON CAN PRODUCE HYPERTENSIVE CRISIS.

IMMUNE GLOBULIN - SEE GLOBULIN, IMMUNE SERUM

IMMUNE SERUM GLOBULIN, HUMAN - SEE GLOBULIN, IMMUNE SERUM

INDERAL - SEE PROPRANOLOL HYDROCHLORIDE

INDOCIN - SEE INDOMETHACIN

INDOMETHACIN
TRADE NAME INDOCIN
CATEGORY 28:08.04 NONSTEROIDAL ANTI-INFLAMMATORY AGENTS
REGIMEN ORAL: 25 TO 50 MG THREE TIMES DAILY WITH FOOD OR MILK.
DO NOT TAKE ASPIRIN WHEN TAKING INDOMETHACIN.
DOSAGE FORM INDOMETHACIN CAPSULES 25 MG *INDOCIN*
CAUTIONS INDOMETHACIN MAY CAUSE EXACERBATION OF PEPTIC ULCER.
MAY CAUSE DROWSINESS.

INH - SEE ISONIAZID

INHALER, AMMONIA - SEE AMMONIA SPIRIT, AROMATIC

INHALER, SPINHALER - SEE CROMOLYN SODIUM

INNOVAR - SEE FENTANYL CITRATE

INSECT STING TREATMENT KIT
TRADE NAME ANA-KIT
BEE STING KIT
CATEGORY 92:00 UNCLASSIFIED AGENT
REGIMEN COMPLETE DETAILED PATIENT INSTRUCTIONS ARE PROVIDED INSIDE EACH KIT.
DOSAGE FORM INSECT STING TREATMENT KIT *ANA-KIT*
CONTAINS:
1 SYRINGE CONTAINING TWO SINGLE DOSES OF EPINEPHRINE 1:1000
4 TABLETS OF CHLORPHENIRAMINE MALEATE 2 MG
1 TOURNIQUET
2 ALCOHOL SWABS
1 INSTRUCTION SHEET

INSULIN, REGULAR
TRADE NAME ILETIN, REGULAR
CATEGORY 68:20.08 INSULINS
DOSAGE FORM INSULIN INJECTION USP, 100 UNITS PER ML, 10 ML VIAL
NOTE ITEMS MUST BE REFRIGERATED.
INTERACTION WITH PROPRANOLOL: BLUNTS REBOUND OF BLOOD GLUCOSE FOLLOWING INSULIN INDUCED HYPOGLYCEMIA.
WITH MAOI'S: ENHANCES AND PROLONGS HYPOGLYCEMIA RESPONSE TO INSULIN.

INSULIN, ISOPHANE
TRADE NAME NPH INSULIN
CATEGORY 68:20.08 INSULINS
DOSAGE FORM ISOPHANE INSULIN INJECTION USP 100 UNITS PER ML, 10 ML VIAL

-CONTINUED-
INSULIN, ISOPHANE
NOTE ITEMS MUST BE REFRIGERATED.
INTERACTION WITH PROPRANOLOL: BLUNTS REBOUND OF BLOOD GLUCOSE FOLLOWING INSULIN INDUCED HYPOGLYCEMIA.
WITH MAOI'S: ENHANCES AND PROLONGS HYPOGLYCEMIA RESPONSE TO INSULIN.

INSULIN ZINC SUSPENSION USP
TRADE NAME LENTE INSULIN
CATEGORY 68:20.08 INSULINS
DOSAGE FORM INSULIN ZINC SUSPENSION USP 100 UNITS PER ML, 10 ML VIAL

INTAL - SEE CROMOLYN SODIUM

INTRAVENOUS SOLUTIONS, ADDITIVE PRODUCTS, AND ACCESSORIES
CATEGORY 40:12 REPLACEMENT SOLUTIONS
DOSAGE FORM DEXTROSE SOLUTIONS -D GLUCOSE- USP
DEXTROSE INJECTION USP 5% -D5W- 50 ML IN BAG
DEXTROSE INJECTION USP 5% -D5W- 100 ML IN BAG
DEXTROSE INJECTION USP 5% -D5W- 250 ML BAG
DEXTROSE INJECTION USP 5% -D5W- 1000 ML BAG
DEXTROSE INJECTION USP 10% -D10W- 1000 ML
DEXTROSE AND SODIUM CHLORIDE SOLUTIONS USP
DEXTROSE 5% AND SODIUM CHLORIDE .9% INJECTION USP 1000 ML -D5NS-
DEXTROSE 5% AND SODIUM CHLORIDE .45% INJ. USP 1000 ML -D5 1/2NS-
DEXTROSE 5% AND SODIUM CHLORIDE .45% INJECTION USP WITH
20 MEQ OF POTASSIUM CHLORIDE, 1000 ML
DEXTROSE 5% AND SODIUM CHLORIDE 0.3% INJ. USP 500 ML -D5 1/3NS-
DEXTROSE 5% AND SODIUM CHLORIDE .2% INJ. USP 500 ML -D5 1/4NS-
MISCELLANEOUS SOLUTIONS CONTAINING DEXTROSE
DEXTROSE 5% AND LACTATED RINGERS INJECTION 1000 ML -D5LR-
SODIUM CHLORIDE SOLUTIONS
SODIUM CHLORIDE INJECTION USP 0.9%, 1000 ML -NS-
ISOTONIC SODIUM CHLORIDE
EACH 100 ML CONTAINS:
SODIUM CHLORIDE 0.9 GM
PROVIDING IN EACH 100 ML:
SODIUM 15.4 MEQ
CHLORIDE 15.4 MEQ
SODIUM CHLORIDE INJECTION USP 0.9% 250 ML -NS-
SODIUM CHLORIDE INJECTION USP 0.9% 50 ML MINIBAG (IVPB)
SODIUM CHLORIDE INJECTION USP 0.9% 100 ML MINIBAG (IVPB)
SODIUM CHLORIDE INJECTION USP 0.45% 1000 ML -1/2 NS-
MISCELLANEOUS IV SOLUTIONS AND ADDITIVE PRODUCTS
HYPERALIMENTATION KIT.....
CONSULT PHARMACY IV SERVICE FOR FORMULATIONS
ALSO SEE PROTEIN HYDROLYSATE
EACH KIT CONTAINS:
AMINO ACID SOLUTION 8.5% 500 ML *FREAMINE II*TRAVASOL*
DEXTROSE 50% IN WATER 500 ML IN A 1000 ML BOTTLE
TRANSFER SET
ADDITIVE CAP
LABEL

INTROPIN - SEE DOPAMINE HYDROCHLORIDE

CATEGORY 56120 EMETIC
REGIMEN EMETIC, ADULT: 15 TO 30 ML
DOSAGE FORM IPECAC SYRUP USP, 30 ML

IPROVERATRIL - SEE VERAPAMIL

IRON DEXTRAN
TRADE NAME INFERON
CATEGORY 20104.04 IRON PREPARATION
DOSAGE FORM IRON DEXTRAN COMPLEX INJECTION 40 MG PER ML, 10 ML VIAL

IRON SULFATE - SEE FERROUS SULFATE USP

ISMELIN - SEE GUANETHIDINE SULFATE

ISOAMYL NITRITE - SEE AMYL NITRITE

ISOETHARINE
TRADE NAME BRONKOSOL
CATEGORY 12132 SYMPATHOMIMETIC "ADRENERGIC" AGENT
REGIMEN AEROSOL: 0.25 ML TO 0.5 ML OF A 1% SOLUTION DILUTED 1:3 VIA IPPB
DOSAGE FORM ISOETHARINE FOR ORAL INHALATION, 10 ML *BRONKOSOL®BETA-2®
ISOETHARINE FOR ORAL INHALATION 30 ML
CONTAINS:
ISOETHARINE HYDROCHLORIDE 1.0%
IN AQUEOUS GLYCERINE SOLUTION

ISOMETHEPTENE
TRADE NAME MIDRIN
CATEGORY 12132 SYMPATHOMIMETIC AGENTS
DOSAGE FORM ISOMETHEPTENE, DICHLORALPHENAZONE, AND ACETAMINOPHEN CAPSULES *MIDRIN®
EACH CAPSULE CONTAINS:
ISOMETHEPTENE 65 MG
DICHLORALPHENAZONE 100 MG
ACETAMINOPHEN 325 MG

ISONIAZID USP
TRADE NAME INH
ISONICOTINIC ACID HYDRAZIDE
HYDRAZID
CATEGORY 81AG ANTITUBERCULAR AGENT
REGIMEN ORAL, 5 MG TO 5 MG PER KG OF BODY WEIGHT
DOSAGE FORM ISONIAZID TABLETS USP 100 MG
ISONIAZID TABLETS USP 300 MG
CAUTIONS ISONIAZID MAY CAUSE POSITIVE COOMBS' TEST.
INTERACTION WITH ALCOHOL, CHRONIC: ENHANCED METABOLISM TO REDUCE INH EFFECTIVENESS.
WITH ANTACIDS, WHICH CONTAIN ALUMINUM: INHIBIT INH ABSORPTION.
WITH DISULFIRAM: ALTER CATECHOLAMINE METABOLISM TO PRODUCE PSYCHOTIC EPISODES, ATAXIA.
WITH PHENYTOIN: INHIBITION OF MICROSOMAL ENZYMES MAY INCREASE PHENYTOIN TOXICITY.

ISOPHANE INSULIN - SEE INSULIN, ISOPHANE

ISOPROPYL ALCOHOL - SEE ALCOHOL, ISOPROPYL

ISOPROTERENOL HYDROCHLORIDE USP
TRADE NAME IPRENOL
CATEGORY 12112 SYMPATHOMIMETIC-ADRENERGIC AGENT
REGIMEN INHALATION, 0.5 ML OF 1:200 SOLUTION
DOSAGE FORM ISOPROTERENOL HYDROCHLORIDE INJECTION 1:5000, 1 ML *ISUPREL®, ISUPREL®

ISOPTIN - SEE VERAPAMIL

ISOSORBIDE DINITRATE
TRADE NAME ISOROIL
SORBITRATE
CATEGORY 24112 VASODILATING AGENT
REGIMEN ORAL, INITIAL: 5 MG 4 TIMES A DAY BEFORE MEALS AND AT BEDTIME.
ORAL, MAINTENANCE: 5 MG TO 30 MG FOUR TIMES A DAY.
DOSAGE FORM ISOSORBIDE DINITRATE SUBLINGUAL TABLETS 5 MG
ISOSORBIDE DINITRATE TABLETS 10 MG
ISOSORBIDE DINITRATE SUSTAINED RELEASE CAPSULES 40 MG

ISOTRETINOIN
TRADE NAME ACCUTANE
CATEGORY 84136 MISCELLANEOUS SKIN AND MUCOUS MEMBRANE PREPARATIONS
DOSAGE FORM ISOTRETINOIN CAPSULES 40 MG *ACCUTANE®
NOTE USE IS AUTHORIZED FOR DERMATOLOGY SERVICE.
CAUTIONS NOT TO BE USED IN WOMEN WHO ARE OR ARE PLANNING TO BECOME PREGNANT.
INTERACTION WITH VITAMIN A SUPPLEMENTS: ADDITIVE TOXIC EFFECTS.

ISOXSUPRINE HYDROCHLORIDE
TRADE NAME VASODILAN
CATEGORY 24112 VASODILATING AGENT
REGIMEN ORAL: 10-20 MG 3 TO 4 TIMES A DAY.
PARENTERAL: IM: 5-10 MG TWO OR THREE TIMES A DAY.
DOSAGE FORM ISOXSUPRINE HYDROCHLORIDE TABLETS 10 MG
ISOXSUPRINE HYDROCHLORIDE INJECTION 5 MG PER ML, 2 ML AMPULE

JANIMINE - SEE IMIPRAMINE

KAOLIN NF
TRADE NAME KAOPECTATE
PARAPECTOLIN
CATEGORY 56108 ANTI-DIARRHEA AGENT
REGIMEN 15 ML TO 30 ML
ORAL: 45 ML TO 90 ML.
ORAL, 60 TO 120 ML AFTER EACH BOWEL MOVEMENT.
ADULT: 15 ML GARGLED AND EXPECTORATED EVERY FOUR TO SIX HOURS.
DOSAGE FORM KAOLIN AND PECTIN SUSPENSION
EACH 30 ML CONTAINS:
KAOLIN 5.8 GM

-CONTINUED- KAOLIN NF
PECTIN 130.0 MG
KAOLIN AND PECTIN POWDER, 53 GRAMS PER BOTTLE FOR RECONSTITUTION
KAOPECTATE
EACH RECONSTITUTED 30 ML CONTAINS:
KAOLIN 5.8 GM (90 GR)
PECTIN 130.0 MG (2 GR)
KAOLIN, PECTIN, AND PAREGORIC *DIARRHEA MIXTURE*PARAPECTOLIN*
EACH 30 ML CONTAINS:
PAREGORIC 3.7 ML
PECTIN 162.0 MG
KAOLIN 5.5 GM

KAOPECTATE - SEE KAOLIN

KAY CIEL - SEE POTASSIUM CHLORIDE

KCL - SEE POTASSIUM CHLORIDE USP

KEFZOL - SEE CEFAZOLIN SODIUM

KENALOG - SEE TRIAMCINOLONE

KENALOG IN ORABASE - SEE ORAL PROTECTIVE BASE AND/OR TRIAMCINOLONE

KETOCONAZOLE
TRADE NAME NIZORAL
CATEGORY 8:12.04 ANTIFUNGAL ANTIBIOTICS
REGIMEN ORAL, ADULT: 200 MG TO 400 MG DAILY.
ORAL, PEDIATRIC: 20 KG OR LESS - 50 MG/DAY, 20 KG TO 40 KG - 100 MG/DAY
NOTE: USED ONLY IN INFECTIONS RESISTANT TO GRISEOFULVIN OR PATIENTS INTOLERANT TO GRISEOFULVIN.
NEEDS ACIDITY FOR ABSORPTION.
DOSAGE FORM KETOCONAZOLE TABLETS 200 MG *NIZORAL*

KWELL - SEE BENZENE HEXACHLORIDE, GAMMA

LACTOBACILLUS ACIDOPHILUS
TRADE NAME RACID
CATEGORY 56:08 ANTI-DIARRHEA AGENT
REGIMEN ORAL, 2 CAPSULES 2 TO 4 TIMES DAILY WITH AT LEAST A 1/2 GLASSFUL OF MILK OR TOMATO JUICE
DOSAGE FORM LACTOBACILLUS ACIDOPHILUS CAPSULES WITH SODIUM CARBOXYMETHYLCELLULOSE 100 MG *RACID*
NOTE ITEM MUST BE REFRIGERATED

LANOLIN
TRADE NAME WOOL FAT
CATEGORY 84:24.12 BASIC OINTMENT AND PROTECTANT
DOSAGE FORM *WOOL FAT*
LANOLIN, ANHYDROUS, 60 GRAMS
LANOLIN ANHYDROUS - 1 POUND

LANOXIN - SEE DIGOXIN

LASIX - SEE FUROSEMIDE

LCD - SEE COAL TAR

LENTE INSULIN - SEE INSULIN ZINC SUSPENSION

LEVARTERENOL
TRADE NAME LEVOPHED
NOREPINEPHRINE (OFFICIAL NAME)
CATEGORY 12:12 SYMPATHOMIMETIC -ADRENERGIC- AGENT
REGIMEN SLOW INTRAVENOUS INFUSION
DOSAGE FORM LEVARTERENOL BITARTRATE INJECTION 2 MG PER ML, 4 ML AMPULE (EQUIVALENT TO LEVARTERENOL BASE 1 MG PER ML)
NOTE AVAILABLE ONLY FROM CRASH CART.
CAUTIONS LEVARTERENOL MAY CAUSE CUTANEOUS NECROSIS AFTER INFILTRATION OF NOREPINEPHRINE.

LEVOPHED - SEE LEVARTERENOL

LEVOTHROID - SEE LEVOTHYROXINE SODIUM

LEVOTHYROXINE SODIUM USP
TRADE NAME LEVOID
LEVOTHROID (FORMERLY LETTER)
SYNTHROID
CATEGORY 68:36 THYROID HORMONE (SYNTHETIC SALT OF THYROXINE (T-4))
REGIMEN INITIAL DOSE- 100 MCG DAILY.
MAINTENANCE DOSE: 100 MCG TO 400 MCG DAILY.
DOSAGE FORM SODIUM LEVOTHYROXINE TABLETS USP 100 MCG (0.1 MG)

LIBRIUM - SEE CHLORDIAZEPOXIDE HYDROCHLORIDE

LIDEX - SEE FLUOCINONIDE

LIDOCAINE (CARDIAC)
TRADE NAME XYLOCAINE
CATEGORY 24:04 CARDIAC DRUG
DOSAGE FORM LIDOCAINE HYDROCHLORIDE INJECTION 100 MG, 5 ML PRE-FILLED SYRINGE FOR CARDIAC ARRHYTHMIAS
LIDOCAINE 2 GM IN 500 ML OF D5W (0.4% LIDOCAINE) FOR INFUSION (DRIP)

LIDOCAINE (EENT)
TRADE NAME VISCOUS XYLOCAINE
CATEGORY 52:16 EENT LOCAL ANESTHETIC AGENT
REGIMEN GARGLE: DILUTE ONE TEASPOONFUL IN 1 TO 2 TEASPOONFUL OF WATER GARGLE AS NEEDED FOR SORE THROAT, RINSE THOROUGHLY AFTER USE.
DOSAGE FORM LIDOCAINE HYDROCHLORIDE 2% IN SODIUM CARBOXYMETHYLCELLULOSE 100 ML BOTTLE *XYLOCAINE VISCOUS*
LIDOCAINE HYDROCHLORIDE SOLUTION 4%, TOPICAL, 50 ML
NOTE USE OF LIDOCAINE 4% TOPICAL IS AUTHORIZED FOR ANESTHESIA DEPARTMENT.

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TRADE NAME XYLOCAINE
CATEGORY 72:00 LOCAL ANESTHETIC
84:08 SKIN AND MUCOUS MEMBRANE ANTIPRURITIC AND LOCAL ANESTHETIC
REGIMEN SUGGESTED MAXIMUM, TOPICAL, 200 MG
PARENTERAL, 20 ML OF A 2% OR 50 ML OF A 1% SOLUTION
DURATION APPROXIMATELY ONE AND ONE-HALF HOURS.
FOR SADDLE BLOCK ANESTHESIA: 1.0 ML OF 5% LIDOCAINE
FOR SURGICAL ANESTHESIA: 1.5 ML TO 2.0 ML OF 5% LIDOCAINE
DOSAGE FORM LIDOCAINE HYDROCHLORIDE INJECTION 0.5%, 50 ML, MULTIPLE DOSE VIAL
CONTAINS PRESERVATIVES
LIDOCAINE HYDROCHLORIDE INJECTION 1%, 20 ML
LIDOCAINE HYDROCHLORIDE INJECTION USP 2%, 20 ML MULTIPLE DOSE VIAL •
CONTAINS PRESERVATIVES
LIDOCAINE HYDROCHLORIDE 2% JELLY, 30 GM TUBE •XYLOCAINE•
LIDOCAINE HYDROCHLORIDE OINTMENT 5%, 35 GM
(A TOPICAL ANESTHETIC FOR USE ON MUCOUS MEMBRANES) •
LIDOCAINE HYDROCHLORIDE INJECTION 1.5% WITH EPINEPHRINE 1:200,000 30 ML
AMPUL
LIDOCAINE HYDROCHLORIDE 1% WITH EPINEPHRINE 1:100,000 PER ML •
20 ML VIAL
CONTAINS PRESERVATIVES
CAUTIONS LIDOCAINE IV MAY PRECIPITATE SEIZURES.

LIOTHYRONINE SODIUM
TRADE NAME CYTOMEL
CATEGORY 68:36 THYROID HORMONE (T3-3)
REGIMEN ORAL, INITIAL 5 TO 25 MCG
DOSAGE FORM SODIUM LIOTHYRONINE TABLETS 25 MCG

LIPO-HEPIN - SEE HEPARIN SODIUM

LIPOSYN - SEE FAT EMULSION

LITHANE - SEE LITHIUM CARBONATE

LITHIUM
TRADE NAME ESKALITH
LITHANE
CATEGORY 28:28 ANTIMANIC AGENTS
REGIMEN 600 MG 3 TIMES A DAY INITIALLY, THEN 300 MG 3 TIMES A DAY
DOSAGE FORM LITHIUM CARBONATE CAPSULES 300 MG •ESKALITH•LITHONATE•

LOMOTIL - SEE DIPHENOXYLATE HYDROCHLORIDE

LONITEN - SEE MINOXIDIL

LOPID - SEE GEMFIBROZIL

LOPRESSOR - SEE METOPROLOL TARTRATE

LOESTRIN - SEE ETHINYL ESTRADIOL COMBS. ORL/OR NONCONTRL

LUMINAL - SEE PHENOBARBITAL

MAALOX - SEE ALUMINUM HYDROXIDE AND/OR MAGNESIA AND ALUMINA

MACRODANTIN - SEE NITROFURANTOIN USP

MAGNESIA AND ALUMINA SUSPENSION
TRADE NAME MAALOX
CATEGORY 56:04 ANTACID AND ADSORBENT
REGIMEN TWO TO FOUR TEASPOONFULS 20 MINUTES TO ONE
HOUR AFTER MEALS AND AT BEDTIME.
DOSAGE FORM MAGNESIA AND ALUMINA SUSPENSION •MAALOX• 177 ML

MAGNESIUM CITRATE
TRADE NAME CITRATE OF MAGNESIA
CATEGORY 56:12 CATHARTICS
REGIMEN 200 TO 300 ML
DOSAGE FORM MAGNESIUM CITRATE SOLUTION NF 350 ML

MAGNESIUM HYDROXIDE - SEE ALUMINUM HYDROXIDE (AS VARIOUS COMBINATIONS)

MAGNESIUM SULFATE USP
TRADE NAME MAGSO4
CATEGORY 20:12 ANTICONVULSANT
56:12 CATHARTIC
DOSAGE FORM MAGNESIUM SULFATE INJECTION USP -50%- 500 MG PER ML, •
PROVIDES 4 MEQ OF MAGNESIUM PER ML, 2 ML AMPUL

MANDELAMINE - SEE METHENAMINE MANDELATE

MANNITOL NF
TRADE NAME OSMITROL
CATEGORY 36:40 KIDNEY FUNCTION DIAGNOSTIC AGENT
40:28 OSMOTIC DIURETIC
REGIMEN NOTE: IF CRYSTALS ARE FORMED, WARM TO BRING INTO SOLUTION.
CAUTION: DO NOT USE MICROWAVE OVENS TO HEAT.
DOSAGE FORM MANNITOL INJECTION NF 25%, 50 ML AMPULE •

MEBARAL - SEE MEPHOBARBITAL

MEBENDAZOLE
TRADE NAME VERMOX
CATEGORY 8:08 ANTHELMINTICS
REGIMEN FOR ENTEROBIASIS- 100 MG IN A SINGLE DOSE. FOR TRICHURIASIS,
ASCARIASIS, HOOKWORM INFESTATION OR MIXED INFESTATIONS, 100 MG IN
MORNING AND EVENING FOR 3 CONSECUTIVE DAYS. IF NOT CURED IN 3-4 WEEKS
REPEAT PROCEDURE.
NOT RECOMMENDED FOR CHILDREN UNDER 2 YEARS OF AGE.
DOSAGE FORM MEBENDAZOLE CHEWABLE TABLETS 100 MG •VERMOX• •
CAUTIONS MAY CAUSE DIARRHEA, ABDOMINAL PAIN AND DIZZINESS.
CONTRAINDICATED DURING PREGNANCY.

-CONTINUED-

MEBENDAZOLE
CONTRAINDICATED IN HYPERSENSITIVITY TO MEBENDAZOLE.

MECLIZINE HYDROCHLORIDE USP
TRADE NAME ANTIVERT
BONINE
CATEGORY 56:20 ANTI-EMETIC
REGIMEN 25 MG ONCE OR TWICE DAILY
DOSAGE FORM MECLIZINE HYDROCHLORIDE CHEWABLE TABLETS 25 MG

MEDROL - SEE METHYLPREDNISOLONE

MEDROXYPROGESTERONE ACETATE USP
TRADE NAME DEPO-PROVERA
PROVERA
CATEGORY 68:32 PROGESTOGEN
REGIMEN 2.5 MG TO 10 MG DAILY.
DOSAGE FORM MEDROXYPROGESTERONE TABLETS USP 10 MG *AMEN*PROVERA*
STERILE MEDROXYPROGESTERONE ACETATE SUSPENSION FOR INJECTION USP,
50 MG PER ML, 5 ML VIAL *DEPO-PROVERA*

MELLARIL - SEE THIORIDAZINE HYDROCHLORIDE

MEPERIDINE HYDROCHLORIDE NF
TRADE NAME DEMEROL
CATEGORY 28:08 ANALGESIC
REGIMEN ORAL, 50-150 MG EVERY 3-4 HOURS
PARENTERAL, 50-150 MG EVERY 3-4 HOURS IM OR IV
NOTE: NARCAN IS THE ANTIDOTE.
DOSAGE FORM MEPERIDINE HYDROCHLORIDE TABLETS 50 MG
MEPERIDINE HYDROCHLORIDE INJECTION 100 MG PER ML
DISPOSABLE UNIT - TUBEX
1 ML FILL IN 2 ML SYRINGE
MEPERIDINE HYDROCHLORIDE INJECTION 75 MG
PER ML DISPOSABLE UNIT - TUBEX
1 ML FILL IN 2 ML SYRINGE
MEPERIDINE HYDROCHLORIDE INJECTION 50 MG PER ML
DISPOSABLE UNIT - TUBEX
NOTE MEPERIDINE 50 MG TABLETS AVAILABLE IN 25 REVERSE NUMBERED BLISTER PACK
IN A TAMPER PROOF CONTAINER.
SCHEDULE II CONTROLLED MEDICATION.
MEPERIDINE MAY CAUSE DROWSINESS.
CAUTIONS ALCOHOL SHOULD NOT BE CONSUMED WHILE TAKING MEPERIDINE.
INTERACTION WITH MAOI'S: SEVERE REACTION... IMMEDIATE EXCITATION, SWEATING,
RIGIDITY, AND HYPERTENSION.

MEPHOBARBITAL NF
TRADE NAME MEBARAL
CATEGORY 28:12 ANTICONVULSANT
28:24 SEDATIVE AND HYPNOTIC
REGIMEN ADULT, EPILEPSY MAINTENANCE: 400-600 MG DAILY IN SINGLE OR DIVIDED DOSE
PEDIATRIC- MAINTENANCE, YELNGER THAN 5 YRS OLD: 15-30 MG 3-4 TIMES
DAILY, OLDER THAN 5 YRS: 30-60 MG 3-4 TIMES DAILY.
INITIAL DOSES ARE INDIVIDUALIZED TO PATIENT.
DOSAGE FORM MEPHOBARBITAL TABLETS NF 32 MG

MEPIVACAINE HYDROCHLORIDE NF
TRADE NAME CARBICAINE
CATEGORY 22:00 LOCAL ANESTHETIC
REGIMEN NERVE BLOCK: 1 TO 2% SOLUTION.
TRANSVAGINAL BLOCK: 1% SOLUTION.
PARACERVICAL BLOCK IN OBSTETRICS: 1% SOLUTION EACH SIDE.
CAUDAL AND EPIDURAL BLOCK: 1 TO 2% SOLUTION, WITH NO PRESERVATIVES
INFILTRATION: 0.5 OR 1.0%.
THERAPEUTIC BLOCK (IN MANAGEMENT OF PAIN): 1 TO 2% SOLUTION.
DURATION APPROXIMATELY TWO TO TWO AND ONE-HALF HOURS.
DOSAGE FORM MEPIVACAINE HYDROCHLORIDE INJECTION 1%, 50 ML MULTI DOSE VIAL
MEPIVACAINE HYDROCHLORIDE INJECTION USP 1.5%, 30 ML VIAL

MEPROBAMATE NF
TRADE NAME EQUANIL
MILTOWN
CATEGORY 28:24 SEDATIVES AND HYPNOTICS
REGIMEN ADULT- 400 MG 3-4 TIMES DAILY.
PEDIATRIC- 100-200 MG 2-3 TIMES DAILY.
DOSAGE FORM MEPROBAMATE TABLETS NF 400 MG
NOTE MEPROBAMATE IS A SCHEDULE IV CONTROLLED MEDICATION.
NO REFILLS ARE ALLOWED ON MEPROBAMATE PRESCRIPTIONS.
QUANTITY DISPENSED IS LIMITED TO A 30 DAY SUPPLY.
CAUTIONS MEPROBAMATE MAY CAUSE DROWSINESS.
INTERACTION WITH ALCOHOL, ACUTE: REDUCED METABOLISM AND ENHANCED CNS DEPRESSION.
WITH ALCOHOL, CHRONIC: ENHANCED METABOLISM AND REDUCED SEDATIVE EFFECT.
CAUTIONS INTERFERES WITH SMA 12/60 DETERMINATIONS OF SERUM GLUCOSE, URIC ACID.

MESTRANOL COMBINATIONS
TRADE NAME NORINYL
ORTHO-NOVUM
CATEGORY 68:12 CONTRACEPTIVES
REGIMEN ONE TABLET DAILY FROM THE 5TH THROUGH 25TH DAYS
OF MENSTRUAL CYCLE FOLLOWED BY 7 DAYS WITHOUT MEDICATION
OR WITH PLACEBO SUPPLIED IN 28 DAY PACKAGES.
DOSAGE FORM MESTRANOL AND NORETHINDRONE TABLETS 1/50
WITH 21 TABLETS *NORINYL 1/50-21*
EACH TABLET CONTAINS:
MESTRANOL 50 MCG
NORETHINDRONE 1 MG
MESTRANOL AND NORETHINDRONE TABLETS 1/80
WITH 21 TABLETS *NORINYL 1/80-21*
EACH TABLET CONTAINS:
MESTRANOL 80 MCG
NORETHINDRONE 1 MG
NOTE QUANTITY IS LIMITED TO A 2 MONTH SUPPLY WITH 3 REFILLS.

METANDREN - SEE METHYLTESTOSTERONE

METAPROTERENOL SULFATE
TRADE NAME ALUPENT
CATEGORY 12:12 SYMPATHOMIMETIC -ADRENERGIC- AGENT
REGIMEN 2 OR 3 INHALATIONS, NOT TO EXCEED 12 INHALATIONS PER DAY.
ORAL - 20 MG 3-4 TIMES DAILY
DOSAGE FORM METAPROTERENOL SULFATE METERED DOSE INHALER (0.65 MG PER DOSE) 15 ML

-CONTINUED- METAPROTERENOL SULFATE
METAPROTERENOL SULFATE INHALER REFILL
METAPROTERENOL SULFATE TABLETS 20 MG *METAPREL, ALUPENT*
METAPROTERENOL SULFATE SYRUP, 10 MG PER 5 ML *ALUPENT SYRUP*
CAUTIONS ADVERSE REACTIONS ARE DOSE RELATED
AND CHARACTERISTIC OF SYMPATHOMIMETIC AGENTS.

METHENAMINE MANDELATE USP
TRADE NAME MANDELAMINE
CATEGORY 8:36 URINARY GERMICIDE
DOSAGE FORM METHENAMINE MANDELATE TABLETS USP 500 MG

METHIMAZOLE USP
TRADE NAME TAPAZOLE
CATEGORY 68:36 ANTITHYROID HORMONE
REGIMEN 5-10 MG EVERY 8 HOURS
DOSAGE FORM METHIMAZOLE TABLETS USP 5 MG

METHOCARBAMOL
TRADE NAME ROBAXIN
CATEGORY 12:20 SKELETAL MUSCLE RELAXANT
REGIMEN INITIAL, 1.5 TO 2 GM 4 TIMES A DAY, MAINTENANCE, 1 GM 4 TIMES A DAY.
INJECTION: VARIES IN CONDITION OF THE PATIENT.
DOSAGE FORM METHOCARBAMOL TABLETS 500 MG
METHOCARBAMOL FOR INJECTION 100 MG PER ML, 10 ML SINGLE DOSE VIAL

METHOTREXATE USP
TRADE NAME AMETHOPTERIN
MEXATE
CATEGORY 10:00 ANTINEOPLASTIC AGENT
DOSAGE FORM METHOTREXATE INJECTION 5 MG VIAL
NOTE THIS IS A VERY TOXIC DRUG
CAUTIONS METHOTREXATE MAY CAUSE HEPATIC DYSFUNCTION WITH CHRONIC THERAPY.
INTERACTION WITH BCG VACCINE, CHOLERA VACCINE, INFLUENZA VIRUS VACCINE, MEASLES
MUMPS AND RUBELLA VACCINE, MEASLES VIRUS VACCINE LIVE, MUMPS
VACCINE, MUMPS VIRUS VACCINE LIVE, POLIO VIRUS VACCINE LIVE,
AND RABIES VACCINE: IMMUNOSUPPRESSANTS IMPAIR THE PATIENTS ABILITY
TO PRODUCE AN ANTIBODY TITER IN RESPONSE TO AN ANTIGEN
CHALLENGE. USE OF LIVE OR ATTENUATED VACCINES MAY RISK ACTUAL
INFECTION WITH THE ANTIGENIC AGENT.

METHYLDOPA
TRADE NAME ALDOMET
CATEGORY 2*:OR HYPOTENSIVE AGENT
REGIMEN ORAL, MAINTENANCE: 500 MG TO 2 GM DAILY. (MAXIMUM OF 3 GRAMS DAILY.)
IV, 250 - 500 MG EVERY 6 HRS
DOSAGE FORM METHYLDOPA TABLETS 250 MG
METHYLDOPATE HYDROCHLORIDE INJECTION 50 MG PER ML, 5 ML VIAL *ALDOMET*
CAUTIONS METHYLDOPA MAY CAUSE POSITIVE COOMBS' TEST (10-20% OF CASES) AND
AUTOIMMUNE HEMOLYTIC ANEMIA.
METHYLDOPA MAY CAUSE DROWSINESS.

METHYLENE BLUE NF
CATEGORY 92:00 UNCLASSIFIED (FOR TREATMENT OF DRUG INDUCED METHEMOGLOBINEMIA)
99:00 ANTIDOTES

-CONTINUED- METHYLENE BLUE NF
REGIMEN ADULT: 120 - 300 MG EVERY 4 HOURS. PEDIATRIC: 60 - 150 MG EVERY 4 HOUR
IV: 1 TO 2 MG PER KG OF BODY WT. IN FORM OF A 1% SOLUTION.
FOR MANAGEMENT OF METHEMOGLOBINEMIA.
DOSAGE FORM METHYLENE BLUE INJECTION 1%, 1 ML AMPULE

METHYLERGONOVINE MALEATE
TRADE NAME METHERGINE
CATEGORY 76:00 OXYTOCICS
REGIMEN PARENTERAL, 200 MCG IM OR IV
DOSAGE FORM METHYLERGONOVINE MALEATE INJECTION 200 MCG, 1 ML
METHYLERGONOVINE MALEATE TABLETS 200 MCG

METHYLPHENIDATE HYDROCHLORIDE NF
TRADE NAME RITALIN
RITALIN-SR
CATEGORY 28:20 RESPIRATORY AND CEREBRAL STIMULANT
REGIMEN ORAL, UP TO 20 MG TWO TO THREE TIMES DAILY
DOSAGE FORM METHYLPHENIDATE HYDROCHLORIDE TABLET 10 MG
METHYLPHENIDATE HCL SUSTAINED RELEASE TABLET 20 MG *RITALIN SR*
NOTE SCHEDULE II CONTROLLED MEDICATION.
PRESCRIPTIONS FOR CONTROLLED SUBSTANCES ARE NOT REFILLABLE.

METHYLPREDNISOLONE (SYSTEMIC)
TRADE NAME DEPO-MEDROL
SOLU-MEDROL
CATEGORY 68:04 ADRENAL HORMONE
REGIMEN DOSAGE VARIES
DOSAGE FORM METHYLPREDNISOLONE ACETATE INJECTION 40 MG PER ML,
5 ML VIAL *DEPO-MEDROL*
METHYLPREDNISOLONE SODIUM SUCCINATE INJECTION 40 MG PER ML
SOLU-MEDROL
METHYLPREDNISOLONE SODIUM SUCCINATE INJECTION 125 MG
PER 2 ML *SOLU-MEDROL*
METHYLPREDNISOLONE SODIUM SUCCINATE INJ. 1000 MG VIAL WITH DILUENT
*A-METHAPRED*SOLU-MEDROL*

METHYLROSANILINE CHLORIDE - SEE GENTIAN VIOLET

METHYLTESTOSTERONE
TRADE NAME OUMONE
METANDREN
NEO-HOMBROL (M)
ORETON-METHYL
OS-CAL-MONE
VIRILON
CATEGORY 68:08 ANDROGENS
REGIMEN ORAL, MALE: 10 MG TO 40 MG DAILY. (BUCCAL: 5 MG TO 20 MG DAILY)
ORAL: ONE TABLET THREE TIMES DAILY, AFTER EACH MEAL. *OS-CAL-MONE*
DOSAGE FORM METHYLTESTOSTERONE TABLETS 10 MG, BUCCAL

METOCLOPRAMIDE HYDROCHLORIDE
TRADE NAME REGLAN
CATEGORY 56:20 EMETICS AND ANTIEMETICS
REGIMEN ORAL: 10 MG 30 MINUTES BEFORE EACH MEAL AND AT BEDTIME FOR 2 TO 8 WEEKS

-CONTINUED- METOCLOPRAMIDE HYDROCHLORIDE
DOSAGE FORM METOCLOPRAMIDE HYDROCHLORIDE TABLETS 10 MG *REGLAN*

METOPROLOL TARTRATE
TRADE NAME LOPRESSOR
CATEGORY 24:08 HYPOTENSIVE AGENTS
REGIMEN DOSAGE SHOULD BE INDIVIDUALIZED - INITIALLY, 50 MG TWICE A DAY.
(MAINTENANCE DOSAGE, 100 TO 450 MG PER DAY)
NOTE: DOSAGES ABOVE 450 MG PER DAY HAVE NOT BEEN STUDIED.
ORAL- 50 OR 100 MG TWICE A DAY
DOSAGE FORM METOPROLOL TARTRATE TABLETS 50 MG *LOPRESSOR*
METOPROLOL TARTRATE TABLETS 100 MG *LOPRESSOR*
NOTE BETA-1 SELECTIVITY - USE WITH CAUTION WITH BRONCHOSPASTIC DISEASE.
CAUTIONS MAY PRECIPITATE CONGESTIVE HEART FAILURE.
MAY MASK HYPOGLYCEMIC REACTION.
INTERACTION WITH INSULIN: HYPOGLYCEMIA MAY BE PRECIPITATED.
WITH CATECHOLAMINE DEPLETING DRUGS (EG,RESERPINE): MAY HAVE AN ADDITIVE EFFECT WHEN GIVEN WITH BETA BLOCKING AGENTS RESULTING IN HYPOTENSION, BRADYCARDIA, VERTIGO, SYNCOPE, AND POSTURAL HYPOTENSION.

METRONIDAZOLE
TRADE NAME FLAGYL
CATEGORY 8:04 AMEBACIDE
8:32 TRICHOMONACIDE
REGIMEN ORAL, 250 MG 3 TIMES DAILY FOR 7 DAYS
DOSAGE FORM METRONIDAZOLE TABLETS 250 MG *FLAGYL*
NOTE THIS DRUG MAY CAUSE REACTIONS SIMILAR TO DISULFIRAM (ANTABUSE) WHEN TAKEN WITH ALCOHOL: PATIENTS SHOULD BE CAUTIONED ACCORDINGLY.

MIDRIN - SEE ISOMETHEPTENE

MILTOWN - SEE MEPROBAMATE

MINIPRESS - SEE PRAZOSIN

MINOCIN - SEE MINOCYCLINE HYDROCHLORIDE

MINOCYCLINE HYDROCHLORIDE
TRADE NAME MINOCIN
CATEGORY 8:12.24 TETRACYCLINE
REGIMEN 200 MG INITIALLY, THEN 100 MG EVERY TWELVE HOURS
DOSAGE FORM MINOCYCLINE HYDROCHLORIDE CAPSULES 100 MG.
NOTE USE IS AUTHORIZED FOR DERMATOLOGY SERVICE.
HIGH EXPENSE ITEM - PLEASE CONSIDER TETRACYCLINE.
USE IS AUTHORIZED AFTER AN UNSUCCESSFUL 6 WEEK TRIAL WITH BOTH TETRACYCLINE AND ERYTHROMYCIN.
TOPICAL AGENTS SHOULD ALSO BE TRIED FIRST.
INTERACTION WITH ANTACIDS: BIVALENT AND TRIVALENT CATIONS INHIBIT GI ABSORPTION OF TETRACYCLINES.
WITH BARBITURATES: MICROSOMAL ENZYME INDUCTION TO DECREASE TETRACYCLINE ACTIVITY POSSIBLY.
WITH CARBAMAZEPINE: MICROSOMAL ENZYME INDUCTION TO DECREASE TETRACYCLINE ACTIVITY POSSIBLY.
WITH ORAL IRON PRODUCTS: DECREASED GI ABSORPTION OF TETRACYCLINES.

-CONTINUED- MINOCYCLINE HYDROCHLORIDE
WITH METHOXYFLURANE: COMBINED USE MAY RESULT IN NEPHROTOXICITY.
WITH PENICILLINS: IMPAIRS EFFECTIVENESS OF PENICILLINS BY INTERFERENCE WITH BACTERICIDAL ACTIVITY.

MINOXIDIL
TRADE NAME LONITEN
CATEGORY 24:08 HYPOTENSIVE AGENT
REGIMEN ORAL: INITIALLY, 5 MG DAILY: THEN UP TO 40 MG DAILY IN DIVIDED DOSES.
PATIENTS UNDER 12 YEARS OF AGE: 0.25 MG TO 1.0 MG PER KG PER DAY.
MAXIMUM DOSAGE IS 100 MG PER DAY.
DOSAGE FORM MINOXIDIL TABLETS 10 MG
NOTE DOSE MUST BE TITRATED TO INDIVIDUAL RESPONSE.
USE IS AUTHORIZED FOR SEVERELY HYPERTENSIVE PATIENTS WHO DO NOT RESPOND TO FIRST LINE TREATMENT OF HYPERTENSION.

MITOMYCIN (MITOMYCIN-C)
TRADE NAME MTC
MUTAMYCIN
CATEGORY 10:00 ANTI-NEOPLASTIC AGENTS
REGIMEN 50 MCG PER KG OF BODY WEIGHT PER DAY FOR 5 DAYS. STOP FOR TWO DAYS AND DOSAGE CAN THEN BE REPEATED.
I.V. CATHETER: 20 MG PER SQUARE METER AS A SINGLE DOSE
I.V.: 2 MG PER SQUARE METER PER DAY FOR 5 DAYS, AFTER A DRUG FREE INTERVAL OF 2 DAYS, 2 MG PER SQUARE METER PER DAY FOR 5 DAYS (TOTAL DOSE 20 MG PER SQUARE METER OVER 10 DAYS)
USUAL REGIMEN: 5 MG TO 10 MG PER SQUARE METER.
REPEAT AT 4 WEEK TO 8 WEEK INTERVALS.
DOSAGE FORM MITOMYCIN INJECTION 5 MG (WITH MANNITOL 10 MG) VIAL
NOTE USE IS AUTHORIZED FOR INTERNAL MEDICINE.
CARE SHOULD BE TAKEN TO AVOID EXTRAVASATION OF THIS DRUG.

MORPHINE SULFATE USP
CATEGORY 28:08 ANALGESIC
REGIMEN VARIES WITH PATIENT.
PARENTERAL: 8 MG TO 15 MG EVERY 4 HOURS
NOTE: THE ANTIDOTE IS NARCAN.
DOSAGE FORM MORPHINE SULFATE INJECTION USP 10 MG PER ML
DISPOSABLE UNIT, NEEDLE 25 GA. 5/8 INCH
NOTE SCHEDULE II CONTROLLED MEDICATION.

MOTRIN - SEE IBUPROFEN

MOUTHWASH, ANESTHETIC AND ANTISEPTIC
TRADE NAME CHLORASEPTIC
CATEGORY 52:28 MOUTHWASHES AND GARGLES
DOSAGE FORM SPRAYER, CHERRY FLAVORED *CHERRY CHLORASEPTIC*
CONTAINS
PHENOL
SODIUM PHENOLATE -TOTAL PHENOL 1.4%-
SODIUM BORATE
MENTHOL
THYMOL
GLYCERIN

MULTIVITAMINS, INJ. - SEE VITAMIN B COMPLEX AND/OR VITAMINS,MULTIPLE

MULTIVITAMINS AND MINERALS, PRENATAL - SEE VITAMINS, PRENATAL

MUTAMYCIN - SEE MITOMYCIN

MVI - SEE VITAMINS, MULTI

MYAMBUTOL - SEE ETHAMBUTOL

MYCELEX - SEE CLOTRIMAZOLE

MYCIFRADIN - SEE NEOMYCIN SULFATE USP

MYCOLOG - SEE TRIAMCINOLONE AND/OR NYSTATIN

MYCOSTATIN - SEE NYSTATIN

MYLICON - SEE SIMETHICONE

MYSOLINE - SEE PRIMIDONE

NADOLOL
TRADE NAME CORGARD
CATEGORY 24:04 CARDIAC DRUGS
REGIMEN INITIAL DOSE - 40 MG ONCE DAILY.
ORAL, FOR ANGINA PECTORIS: MAINTENANCE - 80 MG TO 240 MG PER DAY.
MAINTENANCE DOSE - 80 TO 320 MG DAILY ADMINISTERED ONCE DAILY.
ORAL, FOR HYPERTENSION: MAINTENANCE - 160 MG TO 480 MG PER DAY.
NOTE: INDIVIDUALIZED DOSAGE MAY BE TAKEN WITHOUT REGARD TO MEALS.
NOTE: NADOLOL SHOULD BE USED WITH CAUTION IN PATIENTS
WITH IMPAIRED HEPATIC AND RENAL FUNCTION.
CAUTION: REDUCE DOSE GRADUALLY -- SUDDEN CESSATION (IN ANGINA)
MAY CAUSE FATAL MYOCARDIAL INFARCTION.
CAUTION: REDUCE DOSE GRADUALLY -- SUDDEN CESSATION (IN HYPERTENSION)
MAY CAUSE A FLORID-THYROTOXICOSIS-LIKE SYNDROME.
FREQUENCY OF DOSING MUST BE DECREASED IN PATIENT WITH RENAL IMPAIRMENT.
DOSAGE FORM NADOLOL 80 MG SCORED TABLETS *CORGARD*
NOTE NADOLOL IS CONTRAINDICATED IN BRONCHIAL ASTHMA,
SINUS BRADYCARDIA AND GREATER THAN FIRST DEGREE CONDUCTION BLOCK,
CARDIOGENIC SHOCK, AND EVERT CARDIAC FAILURE.
INTERACTION WITH ANTI-DIABETIC AGENTS: HYPOGLYCEMIA PRECIPITATED.
WITH INSULIN: HYPOGLYCEMIA PRECIPITATED.
WITH CATECHOLAMINE DEPLETING DRUGS (RESERPINE): ADDITIVE EFFECT.

NAFCILLIN
TRADE NAME UNIPEN
CATEGORY 8:12.16 PENICILLINS
REGIMEN PARENTERALLY, 500 MG TO 1 GM EVERY 4 HOURS IV OR IM
DOSAGE FORM NAFCILLIN SODIUM INJECTION 1 GM VIAL

TRADE NAME NUBAIN
CATEGORY 28:08 ANALGESIC AND ANTIPYRETIC
REGIMEN PARENTERAL, SC, IM, IV: 10 MG EVERY 3 TO 6 HOURS AS NECESSARY.
DOSAGE FORM NALBUPHINE HYDROCHLORIDE INJECTION 10 MG PER ML, 2 ML AMPULES *NUBAIN*
NOTE NALBUPHINE IS CONTROLLED LOCALLY AS A SCHEDULE II MEDICATION.

NALIDIXIC ACID
TRADE NAME NEG-GRAM
CATEGORY 88:36 URINARY GERMICIDE
REGIMEN ORAL, INITIAL 1 GM FOUR TIMES DAILY FOR 1 OR 2 WEEKS
THEN 500 MG 4 TIMES DAILY AS NEEDED.
DOSAGE FORM NALIDIXIC ACID TABLETS 500 MG
INTERACTION WITH ANTICOAGULANT, ORAL: DISPLACEMENT FROM BINDING SITES WILL INCREASE
ANTICOAGULANT EFFECT.

NALOXONE HCL
TRADE NAME NARCAN
CATEGORY 28:10 NARCOTIC ANTAGONIST
REGIMEN ADULT: 400 MCG - REPEAT AT 2 TO 3 MINUTE INTERVALS.
DOSAGE FORM NALOXONE HYDROCHLORIDE INJECTION 0.4 MG (400 MCG) PER ML, 1 ML AMPUL
NALOXONE HCL INJ. 0.02 MG (20 MCG) PER ML, 2 ML AMPUL *NARCAN NEONATAL*

NAPHAZOLINE HYDROCHLORIDE
TRADE NAME VASOCON-A
CATEGORY 52:32 EENT VASOCONSTRICTOR
REGIMEN DECONGESTION OF THE CONJUNCTIVA: INSTILL 1 TO 2 DROPS TO CONJUNCTIVA
EVERY 3 TO 4 HOURS AS NEEDED FOR 3 TO 4 DAYS.
DOSAGE FORM NAPHAZOLINE HYDROCHLORIDE AND ANTAZOLINE PHOSPHATE OPHTHALMIC SOLN
DROPPER BOTTLE 15 ML *VASOCON-A*
CONTAINS:
NAPHAZOLINE HYDROCHLORIDE 0.05%
ANTAZOLINE PHOSPHATE 0.50%

NAPROSYN - SEE NAPROXEN

NAPROXEN
TRADE NAME ANAPROX
NAPROSYN
CATEGORY 28:08.04 NONSTEROIDAL ANTI-INFLAMMATORY AGENTS
REGIMEN INITIAL ORAL, 250 MG TWICE DAILY (MORNING AND EVENING)
TAKE WITH FOOD OR MILK.
ADJUSTED RESPONSE AND TOLERANCE NOT TO EXCEED 750 MG PER DAY.
PRIMARY DYSMENORRHEA: 500 MG, THEN 250 MG EVERY 6-8 HOURS
NOT RECOMMENDED FOR USE IN CHILDREN.
NOT RECOMMENDED FOR USE DURING PREGNANCY AND NURSING.
MAXIMUM DAILY DOSAGE NOT TO EXCEED 1250 MG PER DAY.
DOSAGE FORM NAPROXEN TABLETS 250 MG *NAPROSYN*
NOTE FACILITY HIGH COST ITEM.
NAPROXEN SHOULD BE GIVEN UNDER CLOSE SUPERVISION TO PATIENTS PRONE
TO UPPER GASTROINTESTINAL TRACT DISEASE AND ONLY AFTER CONSULTING
THE ADVERSE REACTION SECTION. GASTROINTESTINAL BLEEDING SOMETIMES
SEVERE AND OCCASIONALLY FATAL HAS BEEN REPORTED IN PATIENTS

-CONTINUED- NAPROXEN
RECEIVING NAPROXEN.
CAUTIONS AFFECTS GASTRO-INTESTINAL TRACT (ANOREXIA, HEARTBURN, DYSPEPSIA, NAUSEA, VOMITING, GI BLEEDING), HEADACHE, DROWSINESS, VISUAL, AND HEARING DISTURBANCES.
CONTRAINDICATED IN PATIENTS ALLERGIC TO ASPIRIN OR OTHER NONSTEROIDAL ANTI-INFLAMMATORY DRUGS - POSSIBLE CROSS SENSITIVITY REACTIONS.

NARCAN - SEE NALOXONE HCL

NATALINS - SEE VITAMINS, PRENATAL

NEG-GRAM - SEE NALIDIXIC ACID

NEMBUTAL - SEE PENTOBARBITAL SODIUM

NEO-CALGLUCON - SEE CALCIUM GLUBIONATE

NEO-HOMBREOL (M) - SEE METHYLTESTOSTERONE

NEOMYCIN (SYSTEMIC)
TRADE NAME MYCIFRADIN
CATEGORY 8:12.02 AMINOGLYCOSIDES
DOSAGE FORM NEOMYCIN SULFATE TABLETS USP 500 MG *MYCIFRADIN*
CAUTIONS NEOMYCIN MAY CAUSE EOSINOPHILIA AND PERIPHERAL NEUROPATHY.
INTERACTION WITH CEPHALOSPORINS: POSSIBLE NEPHROTOXICITY.
WITH ETHACRYNIC ACID: POSSIBLE HEARING LOSS.
WITH GALLAMINE: NEUROMUSCULAR BLOCKADE.
WITH PANCURONIUM: NEUROMUSCULAR BLOCKADE.
WITH POLYMYXIN B: ADDITIVE FOR NEPHROTOXICITY.
WITH SUCCINYLCHOLINE: NEUROMUSCULAR BLOCKADE
WITH TUBOCURARINE: NEUROMUSCULAR BLOCKADE.

NEOPAP - SEE ACETAMINOPHEN

NEOSPORIN - SEE POLYMYXIN B SULFATE

NEOSTIGMINE
TRADE NAME PROSTIGMIN
CATEGORY 12:04 PARASYMPATHOMIMETIC-CHOLINERGIC AGENT
36:56 DIAGNOSTIC AGENT FOR MYASTHENIA GRAVIS
REGIMEN ORAL, 15 MG THREE TIMES DAILY OR MORE WHEN NEEDED
PARENTERAL, 0.5 MG EVERY 4 TO 6 HOURS, IM OR SC
NOTE: A PARTIAL ANTIDOTE IS ATROPINE SULFATE.
DOSAGE FORM NEOSTIGMINE METHYL SULFATE INJECTION USP
1:1000-1 MG PER ML, 10 ML VIAL

NEOSYNEPHRINE - SEE PHENYLEPHRINE HYDROCHLORIDE

NIACIN NF
TRADE NAME NICOTINIC ACID
CATEGORY 88:08 VITAMIN B COMPLEX
REGIMEN ORAL: 50 MG TO 500 MG DAILY.
ORAL: 500 MG TWICE A DAY.
ORAL FOR HYPERCHOLESTEROLEMIA: 7 TO 9 GRAMS DAILY.

DOSAGE FORM NIACIN TABLETS NF 50 MG

NIFEDIPINE
TRADE NAME PROCARDIA
CATEGORY 24:12 VASODILATING AGENTS
REGIMEN INITIAL DOSE: ORALLY, 10 MG THREE TIMES DAILY.
USUAL EFFECTIVE DOSE RANGE: ORALLY, 10 TO 20 MG THREE TIMES DAILY.
MAXIMUM SINGLE DOSE 30 MG -- MAXIMUM DAILY DOSE 180 MG.
NOTE: DOSES ABOVE 120 MG ARE RARE.
DOSAGE FORM NIFEDIPINE CAPSULES 10 MG *PROCARDIA*
CAUTIONS MAY CAUSE HYPOTENSION DURING THE INITIAL ADMINISTRATION.
INTERACTION WITH BETA BLOCKERS: POSSIBLE HEART FAILURE.

NILSTAT - SEE NYSTATIN

NITROBID - SEE NITROGLYCERIN

NITROFURANTOIN USP
TRADE NAME FURADANTIN
MACRODANTIN
CATEGORY 8:36 URINARY GERMICIDE
REGIMEN ORAL: 50 MG TO 100 MG FOUR TIMES DAILY. (TAKEN WITH FOOD OR MILK)
DOSAGE FORM NITROFURANTOIN ORAL SUSPENSION USP 25 MG PER 5 ML *FURADANTIN*
NITROFURANTOIN MACROCRYSTALS 50 MG CAPSULE *MACRODANTIN*
NITROFURANTOIN MACROCRYSTALS 100 MG CAPSULES *MACRODANTIN*
NOTE IT IS SUGGESTED THAT A GLUCOSE DEHYDROGENASE TEST BE PERFORMED PRIOR TO ADMINISTRATION OF THIS DRUG, PARTICULARLY IN BLACK PATIENTS.
CAUTIONS NITROFURANTOIN MAY CAUSE PRIMAQUINE-SENSITIVE HEPOLYSIS.

NITROGLYCERIN
TRADE NAME NITROL
NTG
TRANSDERM NITRO
CATEGORY 24:12 VASODILATING AGENT
REGIMEN SUBLINGUAL: 150 MCG TO 600 MCG EVERY 2 TO 3 MINUTES WHEN NEEDED.
ADDITIONAL DOSES MAY BE GIVEN AT 5 MINUTE INTERVALS.
NO MORE THAN 3 DOSES MAY BE GIVEN IN A 15 MINUTE PERIOD.
TOPICAL: ONE INCH APPLIED FOUR TIMES DAILY - 30 GM LASTS 7 TO 8 DAYS.
IF IRRITATION IS CAUSED BY TOPICAL OINTMENT, ENCOURAGE SITE ROTATION.
TRANSDERMAL THERAPEUTIC SYSTEM, INITIAL: 5 MG DOSAGE FORM DAILY
THEN TITRATE TO THE DESIRED DOSAGE.
DOSAGE FORM NITROGLYCERIN TABLETS USP 300 MCG (1/200 GRAIN)
NITROGLYCERIN TABLETS USP 400 MCG (1/150 GRAIN)
NITROGLYCERIN TABLETS USP 600 MCG (1/100 GRAIN)
NITROGLYCERIN TRANSDERMAL THERAPEUTIC SYSTEM *NITRO-DUR *TRANSDERM-NITRO*
5 MG OF NITROGLYCERIN RELEASED PER 24 HOURS, 30 SYSTEMS PER PACKAGE
10 MG OF NITROGLYCERIN RELEASED PER 24 HOURS, 30 SYSTEMS PER PACKAGE
NITROGLYCERIN 2% WITH LACTOSE IN LANOLIN, WHITE PETROLATUM BASE OINTMENT, 60 GM *NITROBID OINTMENT*
NOTE NITROGLYCERIN IS DISPENSED IN THE ORIGINAL MANUFACTURER CONTAINER.
SUBLINGUAL TAB SHOULD BE PRESCRIBED IN UNITS OF 100S DUE TO PACKAGING AND STABILITY REQUIREMENTS.

NITROPRUSSIDE SODIUM (DIAGNOSTIC)

-CONTINUED- NITROPRUSSIDE SODIUM (DIAGNOSTIC)
TRADE NAME ACETEST
ACETONE TEST TABLETS
CATEGORY 36:80 URINE CONTENTS DIAGNOSTIC
DOSAGE FORM NITROPRUSSIDE SODIUM REAGENT TABLETS *ACETEST*

NIZORAL - SEE KETOCONAZOLE

NOCTEC - SEE CHLORAL HYDRATE

NONAVITAMINS - SEE VITAMINS, MULTIPLE

NORETHINDRONE
TRADE NAME NORINYL
ORTHO-NOVUM
CATEGORY 68:32 PROGESTOGEN
68:12 CONTRACEPTIVES
REGIMEN ONE TABLET ON FIFTH DAY THROUGH 25TH DAYS
DOSAGE FORM NORETHINDRONE AND ETHINYL ESTRADIOL TABLETS *ORTHO-NOVUM 1/35*
NORINYL 1/35
EACH TABLET CONTAINS:
NORETHINDRONE 1 MG
ETHINYL ESTRADIOL 35 MCG
NORETHINDRONE AND MESTRANOL TABLETS 1/50
*NORINYL 1/50*ORTHO-NOVUM 1/50*
EACH TABLET CONTAINS:
NORETHINDRONE 1 MG
MESTRANOL 50 MCG
NOTE QUANTITY IS LIMITED TO A 3 MONTH SUPPLY WITH THREE REFILLS.
NORETHINDRONE 0.5 MG WITH ETHINYL ESTRADIOL 35 MCG WILL BE MAINTAINED
IN STOCK UNTIL PRESENT SUPPLY EXPIRES. (7/85)

NORGESIC FORTE - SEE ORPHENADRINE CITRATE

NORGESTREL
TRADE NAME LO/OVRAL
OVRAL
CATEGORY 68:12 CONTRACEPTIVES
REGIMEN ONE TABLET ON FIFTH DAY THROUGH 25TH DAYS
OF MENSTRUAL CYCLE FOLLOWED BY 7 DAYS WITHOUT MEDICATION
DOSAGE FORM NORGESTREL AND ESTRADIOL TABLETS *OVRAL*
EACH TABLET CONTAINS:
NORGESTREL 0.5 MG
ETHINYL ESTRADIOL 50 MCG
NORGESTREL WITH ETHINYL ESTRADIOL TABLETS *LO/OVRAL*
EACH TABLET CONTAINS:
NORGESTREL 0.3 MG
ETHINYL ESTRADIOL 30.0 MCG

NORINYL - SEE NORETHINDRONE AND/OR MESTRANOL COMBINATIONS

NORMAL SALINE - SEE SODIUM CHLORIDE USP

NORMAL SERUM ALBUMIN - SEE ALBUMIN, HUMAN

NORMAL SERUM IMMUNE GLOBULIN - SEE HEPATITIS B IMMUNE GLOBULIN (HUMAN)

NORPACE - SEE DISOPYRAMIDE PHOSPHATE

NORTRIPTYLINE HYDROCHLORIDE
TRADE NAME AVENTYL
PAMELOR
CATEGORY 28:16.04 ANTIDEPRESSANT
REGIMEN ADULT DOSE: 25 MG THREE TO FOUR TIMES DAILY, BEGIN AT A LOW LEVEL
AND INCREASE AS REQUIRED.
NOTE ** DOSES ABOVE 100 MG PER DAY ARE NOT RECOMMENDED **
ELDERLY AND ADOLESCENT DOSE: 30 TO 50 MG DAILY IN DIVIDED DOSES.
MAINTENANCE, 30-75 MG DAILY. PEDIATRIC- 1-2 MG PER KG.
DOSAGE FORM NORTRIPTYLINE HYDROCHLORIDE CAPSULES 25 MG
CAUTIONS NORTRIPTYLINE MAY CAUSE DROWSINESS.
ALCOHOL SHOULD NOT BE CONSUMED WHILE TAKING NORTRIPTYLINE.
INTERACTION WITH BARBITURATES: INDUCTION OF MICROSOMAL ENZYMES TO DECREASE
ANTIDEPRESSANT EFFECT.
WITH GUANETHIDINE: TARGET SITE BLOCKAGE ANTAGONIZES ANTIHYPERTENSIVE
EFFECT TO INCREASE HYPERTENSION.
WITH MAOI'S: POSSIBLE HYPERPYREXIA, CONVULSIONS.
WITH SYMPATHOMIMETIC AMINES: INHIBITION OF NOREPINEPHRINE UPTAKE BY
NEURON CAN PRODUCE HYPERTENSIVE CRISIS.

NOVAHISTINE EXPECTORANT - SEE PHENYLPROPANOLAMINE (OLD FORMULA)

NPH - SEE INSULIN, ISOPHANE

NTG - SEE NITROGLYCERIN

NUBAIN - SEE NALBUPHINE

NUPERCAINAL - SEE DIBUCAINE HYDROCHLORIDE

NUTRAPLUS - SEE UREA

NYSTATIN (SYSTEMIC)
TRADE NAME MYCOSTATIN
NILSTAT
CATEGORY 8:12.04 ANTIFUNGAL ANTIBIOTIC
REGIMEN ORAL: 500,000 UNITS THREE TIMES DAILY.
DOSAGE FORM NYSTATIN ORAL TABLETS USP 500,000 UNITS
NYSTATIN ORAL SUSPENSION 100,000 UNITS PER ML, 60 ML

NYSTATIN USP
TRADE NAME MYCOLOG
NILSTAT
CATEGORY 84:04.08 SKIN AND MUCOUS MEMBRANE FUNGICIDE
REGIMEN INTRAVAGINAL: ONE TABLET (100,000 UNITS) DAILY FOR TWO WEEKS.
DOSAGE FORM NYSTATIN OINTMENT USP 100,000 UNITS PER GM, 30 GM
NYSTATIN CREAM USP 100,000 UNITS PER GRAM, 15 GM
NYSTATIN VAGINAL TABLETS 100,000 UNITS, 15'S
NYSTATIN COMPOUND OINTMENT WITH TRIAMCINOLONE *MYCOLOG*
EACH GRAM CONTAINS:
NYSTATIN 100,000 UNITS
NEOMYCIN SULFATE EQUIV. TO BASE 2.5 MG
GRAMICIDIN 0.25 MG

-CONTINUED- NYSTATIN USP
TRIAMCINOLONE 3 MG

OATMEAL, COLLOIDAL
TRADE NAME AVEENO
CATEGORY 84:24,16 SKIN AND MUCOUS MEMBRANE BASIC POWDERS AND DEMULCENTS
DOSAGE FORM COLLOIDAL OATMEAL BATH 510 GRAMS *AVEENO*

OBECALP - SEE PLACEBO

OCULAR LUBRICANT - SEE POLYVINYL ALCOHOL AND/OR METHYLCELLULOSE AND/OR MINERAL OIL AND/OR PETROLATUM

OIL RETENTION ENEMA - SEE MINERAL OIL

OMNIPEN - SEE AMPICILLIN

ONCOVIN - SEE VINCRISTINE

OPIUM (ANTI-DIARRHEA)
TRADE NAME PAREGORIC
CATEGORY 56:OR ANTI-DIARRHEA AGENT
REGIMEN 5 ML FOUR TIMES DAILY
NOTE: ANTIDOTE IS NALORPHINE, LEVALLORPHAN, OR NARCAN
DOSAGE FORM PAREGORIC USP-OPIUM TINCTURE, CAMPHORATED-
480 ML BOTTLE FOR EXTEMPORANEOUS DISPENSING ONLY.

ORABASE - SEE DENTAL PROTECTIVE BASE AND/OR ORAL PROTECTIVE BASE

ORABASE WITH BENZOCAINE - SEE DENTAL PROTECTIVE BASE

ORABASE WITH KENALOG - SEE ORAL PROTECTIVE BASE AND/OR TRIAMCINOLONE

ORAL CONTRACEPTIVES - SEE MESTRANOL AND/OR ETHINYL ESTRADIOL COMBS.

ORAL PROTECTIVE BASE
TRADE NAME KENALOG IN ORABASE
ORABASE
ORABASE WITH BENZOCAINE
CATEGORY 34:00 DENTAL AGENT
DOSAGE FORM DENTAL PROTECTIVE BASE PASTE, 5 GM *ORABASE*
DENTAL PROTECTIVE BASE PASTE / TRIAMCINOLONE, 5 GM *KENALOG IN ORABASE*
ORABASE WITH BENZOCAINE 5 GM TUBE *ORABASE WITH BENZOCAINE*

ORETIC - SEE HYDROCHLOROTHIAZIDE

ORETON - SEE TESTOSTERONE AND/OR METHYLTESTOSTERONE

ORINASE - SEE TOLBUTAMIDE

ORPHENADRINE CITRATE
TRADE NAME NORGESIC FORTE
CATEGORY 12:08 PARASYMPATHOLYTIC - CHOLINERGIC BLOCKING- AGENT
REGIMEN NORGESIC FORTE: ONE TABLET THREE TO FOUR TIMES DAILY.
DOSAGE FORM ORPHENADRINE COMPOUND FORTE *NORGESIC FORTE*

-CONTINUED- ORPHENADRINE CITRATE
EACH TABLET CONTAINS:
ORPHENADRINE CITRATE 50 MG
ASPIRIN 770 MG
CAFFEINE 60 MG
CAUTIONS ORPHENADRINE MAY CAUSE DROWSINESS.
ALCOHOL SHOULD NOT BE CONSUMED WHILE TAKING ORPHENADRINE.
INTERACTION WITH PROPOXYPHENE: ADDITIVE EFFECT MAY INCREASE SIDE EFFECTS OF MENTAL CONFUSION, TREMORS, AND APPREHENSION.

ORTHO-NOVUM - SEE NORETHINDRONE AND/OR MESTRANOL COMBINATIONS

OS-CAL-MONE - SEE METHYLTESTOSTERONE

OVRAL - SEE ETHINYL ESTRADIOL COMB. AND/OR NORGESTREL

OXACILLIN SODIUM USP
TRADE NAME PROSTAPHLIN
CATEGORY 8:12,16 PENICILLIN
REGIMEN 500 MG EVERY FOUR TO SIX HOURS.
DOSAGE FORM SODIUM OXACILLIN CAPSULES USP 250 MG
SODIUM OXACILLIN CAPSULES USP 500 MG
SODIUM OXACILLIN ORAL SUSPENSION 250 MG PER 5 ML, 100 ML
INTERACTION WITH PROBENECID: PROLONG BLOOD LEVELS OF PENICILLINS.

OXAZEPAM
TRADE NAME SERAX
CATEGORY 28:24 SEDATIVE AND HYPNOTICS
REGIMEN ADULT: 15 MG TO 30 MG THREE TO FOUR TIMES A DAY.
SHORTER ACTING THAN OTHER BENZODIAZEPINES.
FOR SEVERE ANXIETY SYNDROME, 30 MG 1 TO 4 TIMES DAILY
CAUTION: THIS MEDICATION IS METABOLIZED BY THE LIVER
THEREFORE CANNOT BE USED IN PATIENTS WITH LIVER DISEASE.
DOSAGE FORM OXAZEPAM CAPSULES 15 MG
NOTE SCHEDULE IV CONTROLLED MEDICATION.

OXYCODONE
TRADE NAME PERCOCET-5
CATEGORY 28:08 ANALGESIC AND ANTIPYRETIC
REGIMEN ONE TABLET EVERY 4 TO 6 HOURS WHEN NEEDED.
ONE CAPSULE EVERY 4 TO 6 HOURS WHEN NEEDED.
DOSAGE FORM OXYCODONE HYDROCHLORIDE AND ACETAMINOPHEN TABLETS *PERCOCET-5*
EACH TABLET CONTAINS:
OXYCODONE HYDROCHLORIDE 5 MG
ACETAMINOPHEN 325 MG
NOTE PERCOCET-5 IS A SCHEDULE II CONTROLLED MEDICATION.
PRESCRIPTIONS FOR SCHEDULE II SUBSTANCES ARE NOT REFILLABLE.
CAUTIONS OXYCODONE MAY CAUSE DROWSINESS.
ALCOHOL SHOULD NOT BE CONSUMED WHILE TAKING OXYCODONE.
ACETAMINOPHEN MAY CAUSE HEPATIC DAMAGE FROM LARGE DOSES.
NOT INDICATED IN PATIENTS WITH KNOWN ALLERGY TO CONTAINED INGREDIENTS.
INTERACTION WITH CENTRAL NERVOUS SYSTEM DEPRESSANTS: ENHANCES CNS DEPRESSION.

OXYMETAZOLINE HYDROCHLORIDE
TRADE NAME AFRIN

-CONTINUED- OXYMETAZOLINE HYDROCHLORIDE
CATEGORY 52:32 EENT VASOCONSTRICTOR
REGIMEN SPRAY 2-3 TIMES IN ONE OR BOTH NOSTRILS ONCE OR TWICE DAILY.
DOSAGE FORM OXYMETAZOLINE NASAL SPRAY 0.05%, 3 ML PLASTIC SPRAY BOTTLE *AFRIN*
NOTE ADVISE PATIENT NOT TO USE FOR MORE THAN 5 DAYS.

PAMELOR - SEE NORTRIPTYLINE

PANCRELIPASE
TRADE NAME COTAZYM
CATEGORY 56:16 DIGESTANTS (CONCENTRATE OF PANCREATIC ENZYMES)
REGIMEN DOSAGE IS DETERMINED BY FAT CONTENT OF THE DIET
300 MG OF PANCRELIPASE IS GIVEN FOR EACH 17 GRAMS OF DIETARY FAT.
COTAZYM: ORAL - THREE CAPSULES WITH MEALS AND ONE CAPSULE WITH SNACKS.
DOSAGE FORM PANCRELIPASE CAPSULES 300 MG *COTAZYM*
PANCRELIPASE CAPSULES *COTAZYM*
EACH CAPSULE CONTAINS:
LIPASE 8,000 UNITS
PROTEASE 30,000 UNITS
AMYLASE 30,000 UNITS
CALCIUM CARBONATE 25 MG

PANHEPRIN - SEE HEPARIN SODIUM

PANOXYL - SEE BENZOYL PEROXIDE

PAPAVERINE HYDROCHLORIDE USP
TRADE NAME CERESPAN
PAVABID
CATEGORY 86:00 SPASMOLYTIC AGENTS
DOSAGE FORM PAPAVERINE HYDROCHLORIDE SUSTAINED ACTION CAPSULES 150 MG
*CERESPAN*PAVABID*THERAFAV*

PARAFON FORTE - SEE CHLORZOXAZONE AND ACETAMINOPHEN

PAREGORIC - SEE OPIUM

PAREPECTOLIN - SEE OPIUM AND/OR PAREGORIC AND/OR KAOLIN
AND/OR PAREGORIC AND KAOLIN MIXTURE

PARLODEL - SEE BROMOCRIPTINE

PAVABID - SEE PAPAVERINE HYDROCHLORIDE

PAVULON - SEE PANCURONIUM BROMIDE

PEDIAZOLE - SEE ERYTHROMYCIN/SULFISOXAZOLE

PEMOLINE
TRADE NAME CYLERT
CATEGORY 28:20 RESPIRATORY AND CEREBRAL STIMULANTS
REGIMEN INITIALLY, 37.5 MG PER DAY; THEN 56.25 MG TO 75 MG PER DAY.
DOSAGE FORM PEMOLINE TABLETS 37.5 MG
NOTE PEMOLINE IS A SCHEDULE IV CONTROLLED SUBSTANCE.

TRADE NAME CUPRIMINE
DEPEN
CATEGORY 64:00 HEAVY METAL ANTAGONIST-COPPER INTOXICATION,
99:00 ANTIDOTES
REGIMEN WILSONS DISEASE, PREVENTION OF STONE FORMATION IN CYSTINURIA.
ORAL, INITIAL 250 MG FOUR TIMES DAILY ADMINISTERED
ON EMPTY STOMACH 2 HOURS BEFORE MEALS AND 3 HOURS AFTER EVENING MEAL.
DOSAGE FORM PENICILLAMINE CAPSULES 250 MG

PENICILLIN, POTASSIUM PHENOXYMETHYL USP - SEE PENICILLIN V

PENICILLIN G, BENZATHINE USP
TRADE NAME BICILLIN-LA
CATEGORY 8:12.16 PENICILLIN
REGIMEN PARENTERAL 600,000 UNITS IM
DOSAGE FORM BENZATHINE PENICILLIN G IM SUSPENSION USP
600,000 UNITS DISPOSABLE UNIT, 1 ML *BICILLIN-LA*
1,200,000 UNITS DISPOSABLE UNIT, 2 ML *BICILLIN-LA*

PENICILLIN G, BENZATHINE AND PENICILLIN G, PROCAINE
TRADE NAME BICILLIN CR
BICILLIN CR 900/300
CATEGORY 8:12.16 PENICILLIN
REGIMEN PARENTERAL, 1 OR 2 ML IM
DOSAGE FORM PENICILLIN G,BENZATHINE AND PENICILLIN G, PROCAINE STERILE IM
SUSPENSION 2 ML CARTRIDGE-NEEDLE UNIT *BICILLIN CR 900/300*
EACH UNIT (2 ML) CONTAINS:
PENICILLIN G, BENZATHINE 900,000 UNITS
PENICILLIN G, PROCAINE 300,000 UNITS
PENICILLIN G, BENZATHINE AND PENICILLIN G, PROCAINE STERILE IM
SUSPENSION 2 ML CARTRIDGE-NEEDLE UNIT *BICILLIN CR*
EACH UNIT (2 ML) CONTAINS:
PENICILLIN G, BENZATHINE USP [illegible],000 UNITS
PENICILLIN G, PROCAINE USP 600,000 UNITS
INTERACTION WITH PROBENECID: PROLONGS BLOOD LEVELS OF PENICILLINS.

PENICILLIN G, PROCAINE USP
TRADE NAME WYCILLIN
CATEGORY 8:12.16 PENICILLIN
REGIMEN PARENTERAL, 300,000 UNITS IM ONCE OR TWICE DAILY.
DOSAGE FORM STERILE PROCAINE PENICILLIN G SUSPENSION FOR
INJECTION USP 600,000 UNITS PER TUBEX, 1 ML
STERILE PROCAINE PENICILLIN G SUSPENSION FOR INJECTION USP
1,200,000 UNITS PER TUBEX, 2 ML
STERILE PROCAINE PENICILLIN G SUSPENSION FOR INJECTION USP
2,400,000 UNITS PER DISPOSABLE SYRINGE, 4 ML
NOTE REFRIGERATE -- CHECK EXPIRATION DATE.

PENICILLIN G, SODIUM
CATEGORY 8:12.16 PENICILLIN
REGIMEN PARENTERAL, 1 TO 20 MILLION UNITS DAILY
DOSAGE FORM PENICILLIN G, SODIUM INJECTION 5,000,000 UNITS

PENICILLIN V
TRADE NAME BETAPEN VK
PEN VEE K
V-CILLIN K
VEETIDS
CATEGORY 8:12.16 PENICILLIN
REGIMEN ADULT: 250 MG TO 500 MG EVERY SIX HOURS. PEDIATRIC: 16 MG PER KG TO 62.5 MG PER KG GIVEN IN EQUALLY DIVIDED DOSES EVERY 4 TO 8 HOURS. PREFERABLE IF TAKEN ON AN EMPTY STOMACH.
NOTE: 250 MG IS APPROXIMATELY 400,000 UNITS
DOSAGE FORM PENICILLIN V TABLETS USP 250 MG (400,000 UNITS)
PENICILLIN V TABLETS USP 500 MG (800,000 UNITS)
PENICILLIN V SUSPENSION 250 MG (400,000 U.) PER 5 ML, 200 ML
INTERACTION WITH PROBENECID: PROLONGS BLOOD LEVELS OF PENICILLINS.

PENICILLIN VK - SEE PENICILLIN V

PENTAERYTHRITOL TETRANITRATE
TRADE NAME PERITRATE
PERITRATE SA
CATEGORY 24:12 VASODILATING AGENT
REGIMEN 10 TO 20 MG THREE TO FOUR TIMES DAILY.
SUSTAINED RELEASE TABLET- MORNING AND EVENING ON AN EMPTY STOMACH.
DOSAGE FORM PENTAERYTHRITOL TETRANITRATE TABLETS 10 MG *PERITRATE*
PENTAERYTHRITOL TETRANITRATE SUSTAINED RELEASE TABLETS 80 MG *PERITRATE-SA*

PENTAZOCINE
TRADE NAME TALWIN
CATEGORY 28:08 ANALGESIC
REGIMEN ORAL: ONE TABLET EVERY 3 TO 4 HOURS.
MAY BE INCREASED TO TWO TABLETS IF NEEDED.
NOTE - METHYLPHENIDATE SHOULD BE USED TO TREAT RESPIRATORY DEPRESSION
NOTE - NARCAN SHOULD BE USED TO TREAT RESPIRATORY DEPRESSION DUE TO OVERDOSAGE, NON-NARCOTIC.
DOSAGE FORM PENTAZOCINE HYDROCHLORIDE TABLETS 50 MG
NOTE PENTAZOCINE IS A SCHEDULE IV CONTROLLED MEDICATION.
PRESCRIPTIONS FOR CONTROLLED SUBSTANCES ARE NOT REFILLABLE.
CAUTIONS PENTAZOCINE MAY CAUSE DEPENDENCE.
PENTAZOCINE MAY CAUSE DROWSINESS.
ALCOHOL SHOULD NOT BE CONSUMED WHILE TAKING PENTAZOCINE.

PENTOBARBITAL SODIUM USP
TRADE NAME NEMBUTAL
CATEGORY 28:24 SEDATIVE AND HYPNOTIC
REGIMEN PARENTERAL, 100 MG IV
DOSAGE FORM SODIUM PENTOBARBITAL INJECTION 50 MG PER ML, 2 ML AMPULE
INTERACTION WITH ALCOHOL,ACUTE: REDUCED METABOLISM TO ENHANCE CNS DEPRESSION.
WITH ALCOHOL, CHRONIC: ENHANCED METABOLISM TO DIMINISH SEDATIVE EFFECT.
WITH ANTICOAGULANTS, ORAL: INDUCTION OF MICROSOMAL ENZYMES TO DECREASE WARFARIN EFFECT.
WITH ANTIDEPRESSANTS, TRICYCLIC: INDUCTION OF MICROSOMAL ENZYMES TO DECREASE ANTIDEPRESSANT EFFECTS.
WITH CORTICOSTEROIDS: INDUCTION OF MICROSOMAL ENZYMES TO DECREASE STEROID EFFECT.

 PENTOBARBITAL SODIUM USP
WITH TETRACYCLINES: INDUCTION OF MICROSOMAL ENZYMES TO DECREASE DOXYCYCLINE ACTIVITY.

PEN VEE K - SEE PENICILLIN V

PERCOCET-5 - SEE ACETAMINOPHEN AND/OR OXYCODONE

PERIACTIN - SEE CYPROHEPTADINE HYDROCHLORIDE

PERITRATE - SEE PENTAERYTHRITOL TETRANITRATE

PERITRATE SA - SEE PENTAERYTHRITOL TETRANITRATE

PERPHENAZINE
TRADE NAME TRILAFON
CATEGORY 28:16.08 TRANQUILIZERS
REGIMEN ORAL- 2 MG TO 8 MG 3 OR 4 TIMES DAILY.
DOSAGE FORM PERPHENAZINE TABLETS 4 MG *TRILAFON*
CAUTIONS PERPHENAZINE MAY CAUSE DROWSINESS.
ALCOHOL SHOULD NOT BE CONSUMED WHILE TAKING PERPHENAZINE.

PERSAGEL - SEE BENZOYL PEROXIDE

PERSANTINE - SEE DIPYRIDAMOLE

PHENAZOPYRIDINE
TRADE NAME PYRIDIUM
CATEGORY 84:08 SKIN AND MUCOUS MEMBRANE ANTIPRURITIC AND LOCAL ANESTHETIC
REGIMEN ORAL: 200 MG THREE TIMES DAILY AFTER MEALS.
DOSAGE FORM PHENAZOPYRIDINE HYDROCHLORIDE TABLETS 100 MG
NOTE PHENAZOPYRIDINE MAY CAUSE DISCOLORATION OF THE URINE.
CAUTIONS PHENAZOPYRIDINE MAY CAUSE METHEMOGLOBINEMIA AND HEMOLYTIC ANEMIA.

PHENERGAN - SEE PROMETHAZINE HYDROCHLORIDE

PHENOBARBITAL USP
TRADE NAME LUMINAL
CATEGORY 28:12 ANTICONVULSANT
28:24 SEDATIVE AND HYPNOTIC
REGIMEN SEDATIVE- ADULT, 30-120 MG PER DAY.
SEDATIVE- PEDIATRIC, 6 MG PER KG 3 TIMES A DAY.
HYPNOTIC- ADULT, 100-320 MG.
HYPNOTIC- PEDIATRIC, 3-6 MG PER KG OF BODY WEIGHT.
DOSAGE FORM PHENOBARBITAL TABLETS USP 30 MG
PHENOBARBITAL ELIXIR USP 20 MG PER 5 ML
PHENOBARBITAL SODIUM INJECTION USP 162 MG PER ML, 2 ML AMPULE
NOTE SCHEDULE IV CONTROLLED MEDICATION.

PHENOL (ENT)
TRADE NAME CHLORASEPTIC
CATEGORY 52:20 MOUTHWASHES AND GARGLES
REGIMEN SPRAY OR GARGLE EVERY TWO HOURS AS DIRECTED.
DOSAGE FORM PHENOL COMPOUND MOUTHWASH AND GARGLE WITH SPRAYER, 90 ML
CHLORASEPTIC MOUTHWASH AND GARGLE

-CONTINUED- PHENOL (EENT)
CONTAINS: PHENOL, SODIUM PHENOLATE, SODIUM BORATE, MENTHOL, THYMOL, AND GLYCERIN (TOTAL PHENOL 1.4%)

PHENOLATED CALAMINE LOTION - SEE CALAMINE USP

PHENTOLAMINE MESYLATE USP
TRADE NAME REGITINE
CATEGORY 12:16 SYMPATHOLYTIC (ADRENERGIC BLOCKING) AGENT
24:08 HYPOTENSIVE AGENT
36:64 DIAGNOSTIC AGENT FOR PHEOCHROMOCYTOMA
REGIMEN PARENTERAL, 5 MG IM OR IV.
DOSAGE FORM PHENTOLAMINE MESYLATE INJECTION USP 5 MG PER AMPULE.
NOTE ANTIDOTE FOR PERIPHERAL ISCHEMIA CAUSED BY ADMINISTRATION OF DOPAMINE.

PHENYLBUTAZONE NF
TRADE NAME AZOLID
BUTAZOLIDIN
CATEGORY 28:08.04 NONSTEROIDAL ANTI-INFLAMMATORY AGENTS
REGIMEN ORAL: 300 MG TO 600 MG DAILY DIVIDED IN 3 TO 4 DOSES.
DOSAGE FORM PHENYLBUTAZONE TABLETS NF 100 MG •

PHENYLEPHRINE (EENT VASOCONSTRICTOR)
TRADE NAME NEOSYNEPHRINE
CATEGORY 52:32 EENT VASOCONSTRICTER
DOSAGE FORM PHENYLEPHRINE HYDROCHLORIDE NASAL SOLUTION USP, 0.25%, 30 ML

PHENYLPROPANOLAMINE
TRADE NAME NOVAHISTINE EXPECTORANT (OLD FORMULA)
CATEGORY 12:12 SYMPATHOMIMETIC -ADRENERGIC- AGENT
DOSAGE FORM PHENYLPROPANOLAMINE HYDROCHLORIDE COMPOUND EXPECTORANT, 120 ML
•NOVAHISTINE EXPECTORANT (OLD FORMULA)•BAYHISTINE EXPECTORANT•
EACH 5 ML CONTAINS:
PHENYLPROPANOLAMINE HCL 18.75 MG
CODEINE PHOSPHATE 10.00 MG
GUAIFENESIN 100.00 MG
ALCOHOL 7.5%
NOTE LIQUIDS ARE PREPACKED IN 120 ML BOTTLES.
PHENYLPROPANOLAMINE COMPOUND/CODEINE IS A SCHED V CONTROL SUBSTANCE.
NO REFILLS ARE AUTHORIZED ON PRESCRIPTIONS FOR CONTROLLED ITEMS.

PHENYTOIN
TRADE NAME DILANTIN
CATEGORY 28:12 ANTI-CONVULSANT
REGIMEN ORAL, 300 MG TO 600 MG DAILY
DOSAGE FORM PHENYTOIN SODIUM CAPSULES USP 100 MG •
PHENYTOIN CHEWABLE FLAVORED TABLETS 50 MG •DILANTIN INFATABS•
PHENYTOIN SODIUM SUSPENSION 125 MG PER 5 ML
PHENYTOIN SODIUM STERILE FOR INJECTION USP 50 MG PER ML, 5 ML •
READY MIXED 22 G X 1 1/4 INCH NEEDLE AND SYRINGE
INTERACTION WITH ALCOHOL, ACUTE: REDUCED METABOLISM OF PHENYTOIN TO INCREASE TOXICITY.
WITH ALCOHOL, CHRONIC: ENHANCED METABOLISM TO REDUCE PHENYTOIN EFFECT.
WITH CHLORAMPHENICOL: INHIBITS METABOLISM OF PHENYTOIN TO INCREASE BLOOD LEVELS AND POSSIBLE TOXICITY TO PHENYTOIN.

WITH DICUMAROLS: INHIBITION OF MICROSOMAL ENZYMES MAY PRODUCE PHENYTOIN TOXICITY.
WITH DISULFIRAM: INHIBITS HEPATIC METABOLISM OF PHENYTOIN LEADING TO PHENYTOIN TOXICITY.
WITH ISONIAZID: INHIBITS METABOLISM OF PHENYTOIN TO INCREASE BLOOD LEVELS AND POSSIBLE TOXICITY TO PHENYTOIN AND SLOW INACTIVATORS OF INH MAY EXPERIENCE PHENYTOIN TOXICITY (GENETIC PROBLEM).
WITH METYRAPONE: TESTING OF PITUITARY-ADRENAL FUNCTION INVALID BECAUSE OF DECREASED METYRAPONE EFFECTS.

PHISOHEX - SEE HEXACHLOROPHENE

PHYSOSTIGMINE SALICYLATE
TRADE NAME ANTILIRIUM
CATEGORY 12:04 PARASYMPATHOMIMETIC-CHOLINERGIC AGENT.
REGIMEN 0.5 TO 2.0 MG IV OR IM -ANTILIRIUM-
DOSAGE FORM PHYSOSTIGMINE SALICYLATE INJECTION 1 MG PER ML, •
2 ML AMPULE •ANTILIRIUM•
NOTE ANTILIRIUM IS INDICATED AS AN ANTIDOTE FOR DELIRIUM, PROLONGED SOMNOLENCE AND OTHER TOXIC EFFECTS OF THE BELLADONNA ALKALOIDS. REPORTS INDICATE THE IV ADMINISTRATION OF 1 MG TO 3 MG WILL REVERSE THE ANTICHOLINERGIC SYMPTOMS OF AMITRIPTYLINE -ELAVIL- POISONING. IT HAS ALSO BEEN USED SUCCESSFULLY IN DIAZEPAM -VALIUM- OVERDOSAGE.

PHYTONADIONE USP
TRADE NAME AQUA MEPHYTON
CATEGORY 88:24 VITAMIN K ACTIVITY (COAGULANT)
REGIMEN PARENTERAL, 5 MG TO 30 MG IM, IV OR SC.
DOSAGE FORM PHYTONADIONE COLLOIDAL SOLUTION FOR INJECTION •
10 MG PER 1 ML AMPULE •AQUA MEPHYTON•
PHYTONADIONE COLLOIDAL SOLUTION FOR INJECTION
2 MG PER ML, 0.5 ML AMPULE •AQUA MEPHYTON, NEO-NATAL STRENGTH•

PILOCARPINE HYDROCHLORIDE USP
TRADE NAME ISOPTO CARPINE
CATEGORY 52:20 MIOTIC
DOSAGE FORM PILOCARPINE HYDROCHLORIDE OPHTHALMIC SOLUTION USP 1.0%, 15 ML •
PILOCARPINE HYDROCHLORIDE OPHTHALMIC SOLUTION USP 2.0%, 15 ML •
PILOCARPINE HYDROCHLORIDE OPHTHALMIC SOLUTION USP 4.0%, 15 ML •

PIPERACILLIN
TRADE NAME PIPRACIL
CATEGORY 8:12.16 PENICILLIN
REGIMEN PARENTERAL, IV OR IM: 2 GRAMS TO 6 GRAMS EVERY 6 HOURS.
PARENTERAL, IV OR IM: 200 MG TO 300 MG PER KG OF BODY WEIGHT EVERY 4 HOURS TO 6 HOURS DEPENDING ON SEVERITY OF THE CONDITION.
DOSAGE FORM PIPERACILLIN SODIUM INJECTION, 4 GM VIAL •PIPRACIL•

PIPRACIL - SEE PIPERACILLIN

PIROXICAM
TRADE NAME FELDENE
CATEGORY 28:08.04 NONSTEROIDAL ANTI-INFLAMMATORY AGENTS
REGIMEN A STEADY STATE BLOOD LEVEL IS NOT REACHED FOR 7 DAYS TO 12 DAYS.

-CONTINUED- PIROXICAM
THUS, THERAPY SHOULD NOT BE ASSESSED FOR TWO WEEKS.
ORAL: USUAL DOSAGE, 10 - 20 MG DAILY, (40 MG DAILY IN EXTREME CASES)
GIVEN AS A SINGLE DAILY DOSE (CAN BE TAKEN WITH FOOD).
DOSAGE FORM PIROXICAM CAPSULES 20 MG
NOTE QUANTITY IS LIMITED TO 30 CAPSULES.
WITH FIVE REFILLS.
HIGH COST ITEM - RESERVE FOR LAST LINE OF THERAPY.
AUTHORIZED FOR TREATMENT OF RHEUMATOID AND OSTEOARTHRITIS.
CAUTIONS PIROXICAM PLASMA LEVEL IS REDUCED BY 80% IF GIVEN WITH ASPIRIN.
CONTRAINDICATED INPATIENTS ALLERGIC TO ASPIRIN OR OTHER NONSTEROIDAL
ANTI-INFLAMMATORY DRUGS DUE TO POSSIBLE CROSS SENSITIVITY.

PITRESSIN - SEE VASOPRESSIN

PITREX - SEE TOLNAFTATE

PITUITARY INJECTION, POSTERIOR - SEE VASOPRESSIN

PITUITRIN - SEE PITUITARY, POSTERIOR

PLACEBO
TRADE NAME OBECALP
CATEGORY 92:00 UNCLASSIFIED THERAPEUTIC AGENT
DOSAGE FORM RED CAPSULES
NOTE ALL PLACEBO CAPSULES ARE SIZE NO. 1.

PLAQUENIL - SEE HYDROXYCHLOROQUINE SULFATE

POLYCILLIN - SEE AMPICILLIN

POLYMOX - SEE AMOXICILLIN

POLYMYXIN B SULFATE (EENT)
TRADE NAME CORTISPORIN
NEOSPORIN
CATEGORY 52:04.04 EENT ANTIBIOTIC
REGIMEN REGIMEN VARIES.
DOSAGE FORM POLYMYXIN, BACITRACIN AND NEOMYCIN OPHTH. OINT. 3.5 GM *NEOSPORIN* *
EACH GRAM CONTAINS:
POLYMYXIN B SULFATE 10,000 UNITS
ZINC BACITRACIN 400 UNITS
NEOMYCIN SULFATE 5 MG
POLYMYXIN, NEOMYCIN AND GRAMICIDIN OPHTH. SOLN, 10 ML *NEOSPORIN* *
EACH ML CONTAINS:
POLYMYXIN B SULFATE 10,000 UNITS
NEOMYCIN SULFATE 2.5 MG
GRAMICIDIN 25 MCG
POLYMYXIN, NEOMYCIN AND HYDROCORTISONE OTIC SUSP, 10 ML *CORTISPORIN* *
EACH ML CONTAINS:
POLYMYXIN B SULFATE 10,000 UNITS
NEOMYCIN SULFATE 5 MG
HYDROCORTISONE 10 MG
POLYMYXIN, BACITRACIN, NEOMYCIN AND HYDROCORTISONE
OPHTHALMIC OINTMENT 3.5 GM *CORTISPORIN*

-CONTINUED- POLYMYXIN B SULFATE (EENT)
EACH GRAM CONTAINS:
POLYMYXIN B SULFATE 5,000 UNITS
BACITRACIN 400 UNITS
NEOMYCIN SULFATE 5 MG
HYDROCORTISONE 10 MG
POLYMYXIN, NEOMYCIN AND HYDROCORTISONE OPHTH SUSP 10 ML *CORTISPORIN*
EACH ML CONTAINS:
POLYMYXIN B SULFATE 10,000 UNITS
NEOMYCIN SULFATE 5 MG
HYDROCORTISONE 10 MG
NOTE CORTISPORIN OTIC SOLUTION MUST BE SPECIFIED ON THE PRESCRIPTION
OR CORTISPORIN OTIC SUSPENSION WILL AUTOMATICALLY BE DISPENSED.
CORTISPORIN OPHTHALMIC CAN BE USED IN THE EAR.

POLYMYXIN B SULFATE (TOPICAL)
TRADE NAME CORTISPORIN
CATEGORY 84:04.04 SKIN AND MUCOUS MEMBRANE ANTIBIOTICS
DOSAGE FORM POLYMYXIN, BACITRACIN, NEOMYCIN AND HYDROCORTISONE TOPICAL OINTMENT
15 GM, *CORTISPORIN*
EACH GRAM CONTAINS:
POLYMYXIN B SULFATE 5000 UNITS
BACITRACIN 400 UNITS
NEOMYCIN SULFATE 5 MG
HYDROCORTISONE 10 MG
POLYMYXIN B 10,000 UNITS AND ZINC BACITRACIN 500 UNITS PER GRAM
TOPICAL OINTMENT 1/32 OZ *POLYSPORIN*
POLYMYXIN B 10,000 UNITS AND ZINC BACITRACIN 500 UNITS PER GM
TOPICAL OINTMENT, 30 GM *POLYSPORIN*

POLYOXYETHYLENE SORBITAN MONOOLEATE
TRADE NAME TWEEN
CATEGORY 96:00 PHARMACEUTICAL AIDS
DOSAGE FORM POLYOXYETHYLENE (20) SORBITAN MONOOLEATE *TWEEN-20*
POLYOXYETHYLENE (80) SORBITAN MONOOLEATE *TWEEN-80*

POLYVINYL ALCOHOL
TRADE NAME LIQUIFILM TEARS
CATEGORY 52:36 EENT UNCLASSIFIED AGENT
REGIMEN 1 TO 2 DROPS IN EYE(S) 3-4 TIMES DAILY AS NEEDED
DOSAGE FORM POLYVINYL ALCOHOL 1.4% AND CHLOROBUTANOL 0.5% OPHTH SOLN, 15 ML

POTACHLOR - SEE POTASSIUM CHLORIDE

POTASSIUM CHLORIDE USP
TRADE NAME KAY CIEL
POTACHLOR
SLOW-K
CATEGORY 40:12 REPLACEMENT AGENT
REGIMEN ORAL, 20 TO 100 MEQ OR MORE DAILY.
PARENTERAL, 250 MG TO 2 GM SLOWLY AS INFUSION, IV.
DOSAGE FORM POTASSIUM CHLORIDE SYRUP 10% 20 MEQ PER 15 ML
POTASSIUM CHLORIDE POWDER FOR ORAL SOLUTION (ORANGE FLAVOR)
1.5 GM, 20 MEQ PER PACKET, 30S *KAY CIEL*
POTASSIUM CHLORIDE 600 MG (8 MEQ) SLOW RELEASE MATRIX *SLOW-K*

POTASSIUM CHLORIDE ELIXIR - SEE POTASSIUM CHLORIDE

POTASSIUM IODIDE USP
TRADE NAME SSKI
CATEGORY 48100 EXPECTORANT AND COUGH PREPARATION
6P136 ANTI-THYROID HORMONE
REGIMEN ADULTS- 0.3 ML (300 MG) EVERY 4 TO 6 HOURS.
CHILDREN- 0.25 ML TO 1.0 ML DAILY IN 2-4 DOSES.
DOSAGE FORM POTASSIUM IODIDE SOLUTION OF 1 GM PER ML *S.S.K.I.*
SATURATED SOLUTION OF POTASSIUM IODIDE
POTASSIUM IODIDE GRANULES
NOTE SOLUTION IS PREPACKED IN A 15 ML DROPPER BOTTLE.
DILUTE SSKI IN ORANGE JUICE OR OTHER LIQUID VEHICLE TO MAKE PALATABLE.

POTASSIUM PENICILLIN G - SEE PENICILLIN G, POTASSIUM

POYAN - SEE PYRVINIUM PAMOATE

POVIDONE-IODINE
TRADE NAME BETADINE
EPODINE
CATEGORY 84120 SKIN AND MUCOUS MEMBRANE DETERGENT
84104.16 MISCELLANEOUS LOCAL ANTI-INFECTIVE
REGIMEN DOUCHE: ONE TABLESPOONFUL PER QUART OF WATER FOR USE.
DOSAGE FORM POVIDONE-IODINE SOLUTION 10%, EQUIVALENT TO 1% AVAILABLE IODINE, 8 OZ

PRAZOSIN
TRADE NAME MINIPRESS
CATEGORY 24108 HYPOTENSIVE AGENTS
REGIMEN INITIAL: 1 MG THREE TIMES DAILY. MAINTENANCE: 6-15 MG DAILY TO A
INITIAL: 2 MG TWO TIMES DAILY. MAINTENANCE: INCREASED SLOWLY TO A
MAXIMUM DAILY TOTAL OF 20 MG GIVEN IN DIVIDED DOSES.
DOSAGE FORM PRAZOSIN HYDROCHLORIDE CAPSULE 1 MG
PRAZOSIN HYDROCHLORIDE CAPSULES 2 MG
PRAZOSIN HYDROCHLORIDE CAPSULES 5 MG
CAUTIONS PRAZOSIN MAY CAUSE DROWSINESS.

PRED MILD - SEE PREDNISOLONE

PRED FORTE - SEE PREDNISOLONE USP

PREDNISOLONE (ENT)
TRADE NAME OCUFORTE
PRED FORTE 1%
PRED MILD
CATEGORY 52108 ENT ANTI-INFLAMMATORY AGENT
DOSAGE FORM PREDNISOLONE 0.12%, POLYVINYL ALCOHOL 1.4%, AND SULFACETAMIDE 10%
OPHTHALMIC SOLUTION IN PE *OCUFORTE*
PREDNISOLONE ACETATE SOLUTE, SUSP. 0.12%, BTL 5 ML, 10 ML *PRED MILD*
PREDNISOLONE ACETATE OPHTHALMIC SUSPENSION 1%, 5 ML
RECONDITED PLUSPHATE FORTE

PREDNISONE USP
TRADE NAME DELTASONE
METICORTEN

 PREDNISONE USP
CATEGORY 68104 ADRENAL HORMONE
REGIMEN 5 MG 2 TO 4 TIMES DAILY.
DOSAGE FORM PREDNISONE TABLETS USP 5 MG
PREDNISONE TABLETS USP 20 MG
PREDNISONE TABLETS USP 50 MG
CAUTIONS PREDNISONE MAY MASK VIRAL, FUNGAL AND BACTERIAL INFECTIONS OF THE SKIN.
PATIENTS RECEIVING STEROIDS SHOULD NOT BE SUBJECTED TO VACCINATIONS
CONSISTING OF LIVE OR ATTENUATED VIRUSES.
INTERACTION WITH PHENOBARBITAL: PHENOBARBITAL ENHANCES METABOLISM OF
CORTICOSTEROIDS AND PATIENTS MAY REQUIRE INCREASED DOSES
OF CORTICOSTEROIDS.

PREMARIN - SEE ESTROGENIC SUBSTANCES, CONJUGATED

PRENATAL VITAMINS - SEE VITAMINS, PRENATAL

PRESAMINE - SEE IMIPRAMINE HYDROCHLORIDE

PRIMIDONE USP
TRADE NAME MYSOLINE
CATEGORY 28112 ANTICONVULSANT
REGIMEN UP TO 2 GM DAILY
DOSAGE FORM PRIMIDONE TABLETS USP 250 MG
PRIMIDONE SUSPENSION 250 MG PER 5 ML
CAUTIONS PRIMIDONE MAY CAUSE DROWSINESS.
ALCOHOL SHOULD NOT BE CONSUMED WHILE TAKING PRIMIDONE.

PRO-BANTHINE - SEE PROPANTHELINE BROMIDE

PROBENECID USP
TRADE NAME BENEMID
CATEGORY 40140 URICOSURIC AGENT
REGIMEN 250 MG TWICE DAILY FOR 1 WEEK, THEN 500 MG TWICE DAILY
DOSAGE FORM PROBENECID TABLETS USP 500 MG
CAUTIONS PROBENECID MAY CAUSE PRIMAQUINE-SENSITIVE HEMOLYSIS.
INTERACTION WITH ASA: ANTAGONIZES RENAL EXCRETION OF URIC ACID.
WITH AVLOSULFON: ELEVATES DAPSONE BLOOD LEVELS BY INHIBITION OF RENAL
EXCRETION.
WITH CEPHALORIDINE: INHIBITION OF RENAL EXCRETION MAY INCREASE
CEPHALORIDINE TOXICITY.
WITH PAS: INHIBITS RENAL EXCRETION TO INCREASE PAS TOXICITY.
WITH RIFAMPIN: DECREASE HEPATIC UPTAKE OF RIFAMPIN TO INCREASE TOXICITY
OF SAME.
WITH PENICILLINS: PROBENECID INTERFERES WITH THE EXCRETION OF
PENICILLINS TO PROLONG BLOOD LEVELS OF SAME.

PROCAINAMIDE HYDROCHLORIDE USP
TRADE NAME PROCAN SR
PRONESTYL
CATEGORY 24104 CARDIAC DRUG
REGIMEN DOSAGE VARIES-SEE PDR FOR PRESCRIBING INFORMATION
NOTE: MAY ALSO BE USED FOR MYOTONIA.
DOSAGE FORM PROCAINAMIDE HYDROCHLORIDE CAPSULES USP 250 MG
PROCAINAMIDE HYDROCHLORIDE SUSTAINED RELEASE TABLETS 500 MG

-CONTINUED- PROCAINAMIDE HYDROCHLORIDE USP
*PROCAN SR*PRONESTYL-SR*
PROCAINAMIDE HYDROCHLORIDE INJECTION USP 100 MG PER ML, 10 ML VIAL *

PROCAINE PENICILLIN G - SEE PENICILLIN G, PROCAINE

PROCAN SR - SEE PROCAINAMIDE HYDROCHLORIDE

PROCARDIA - SEE NIFEDIPINE

PROCHLORPERAZINE
TRADE NAME COMPAZINE
CATEGORY 28:16.08 TRANQUILIZER
56:20 ANTI-EMETIC
REGIMEN ORAL: 5 MG TO 10 MG THREE TO FOUR TIMES DAILY.
PARENTERAL, 5 MG IM
DOSAGE FORM PROCHLORPERAZINE MALEATE TABLETS 5 MG
PROCHLORPERAZINE EDISYLATE INJECTION USP 5 MG PER ML, 2 ML AMPULE
PROCHLORPERAZINE SUPPOSITERIES 25 MG

PROGESTERONE (PROGESTOGEN)
TRADE NAME PROGESTIN
PROLUTON
CATEGORY 68:32 PROGESTOGEN
REGIMEN AMENORRHEA: 25 MG TO 50 MG DAILY FOR 7 TO 10 DAYS.
ABNORMAL UTERINE BLEEDING: 10 MG TO 25 MG DAILY FOR 3 TO 6 DAYS.
PARENTERAL, 25 MG IM
DOSAGE FORM PROGESTERONE INJECTION IN OIL, 100 MG PER ML, 10 ML VIAL

PROMETHAZINE HYDROCHLORIDE USP
TRADE NAME PHENERGAN
CATEGORY 4:00 ANTIHISTAMINE
28:24 SEDATIVE AND HYPNOTIC
REGIMEN ORAL, 12.5-50 MG DAILY
PARENTERAL, 12.5-25 MG EVERY 4-6 HOURS
DOSAGE FORM PROMETHAZINE HYDROCHLORIDE TABLETS USP 25 MG
PROMETHAZINE HYDROCHLORIDE INJECTION USP 25 MG PER ML, 1 ML AMPULE *
PROMETHAZINE HYDROCHLORIDE SUPPOSITORIES 25 MG
PROMETHAZINE EXPECTORANT, 120 ML *PHENERGAN EXPECTORANT*
EACH 5 ML CONTAINS:

PROMETHAZINE HYDROCHLORIDE	5.00 MG
FLUIDEXTRACT IPECAC	0.17 MIN
POTASSIUM GUAIACOLSULFONATE	44.00 MG
CITRIC ACID, ANHYDROUS	60.00 MG
SODIUM CITRATE	197.00 MG
ALCOHOL	7.00 %

CAUTIONS PROMETHAZINE MAY CAUSE DRYNESS OF THE MOUTH, CONSTIPATION OR DYSURIA
PROMETHAZINE MAY CAUSE DROWSINESS.
ALCOHOL SHOULD NOT BE CONSUMED WHILE TAKING PROMETHAZINE.
INTERACTION WITH ANTICHOLINERGICS: ADDITIVE ANTICHOLINERGIC EFFECT.
WITH ANTIDEPRESSANTS, TRICYCLIC: ADDITIVE ANTICHOLINERGIC EFFECT.
WITH CNS DEPRESSANTS: POTENTIATES SEDATION.
WITH PHENOTHIAZINES: ADDITIVE ANTICHOLINERGIC EFFECT.

PRONESTYL - SEE PROCAINAMIDE HYDROCHLORIDE

PROPANTHELINE BROMIDE USP
TRADE NAME PRO-BANTHINE
CATEGORY 12:08 PARASYMPATHOLYTIC-CHOLINERGIC BLOCKING AGENT
REGIMEN ORAL, 15 MG THREE TIMES DAILY AND 30 MG AT BEDTIME.
DOSAGE FORM PROPANTHELINE BROMIDE TABLETS USP 15 MG
CAUTIONS PROPANTHELINE MAY CAUSE SEDATION.

PROPARACAINE
TRADE NAME OPHTHETIC
CATEGORY 52:16 EENT LOCAL ANESTHETIC
REGIMEN OPHTHALMIC: ONE OR TWO DROPS WHEN NEEDED.
DOSAGE FORM PROPARACAINE HYDROCHLORIDE OPHTHALMIC SOLUTION 0.5 %, 15 ML
*ALCAINE*OPHTHETIC*

PROPOXYPHENE HYDROCHLORIDE
TRADE NAME DARVON
CATEGORY 28:08 ANALGESIC AND ANTIPYRETIC
DOSAGE FORM PROPOXYPHENE HYDROCHLORIDE CAPSULES USP 65 MG
CAUTIONS PROPOXYPHENE MAY CAUSE DROWSINESS.
DO NOT CONSUME ALCOHOL WHILE TAKING PROPOXYPHENE.
CONCURRENT USE OF PROPOXYPHENE WITH NORFLEX IS CONTRAINDICATED.
NOTE PROPOXYPHENE HYDROCHLORIDE IS CONTROLLED LOCALLY AS SCHEDULE III ITEM.
SCHEDULE IV CONTROLLED MEDICATION.
NO REFILLS ARE AUTHORIZED ON PROPOXYPHENE.

PROPRANOLOL HYDROCHLORIDE
TRADE NAME INDERAL
CATEGORY 24:04 CARDIAC DRUGS
24:08 HYPOTENSIVE AGENTS
REGIMEN ORAL, FOR ARRHYTHMIAS: 10 TO 30 MG THREE TO FOUR TIMES DAILY.
ORAL, FOR MIGRAINE, 80 TO 240 MG DAILY IN DIVIDED DOSES.
ORAL, FOR HYPERTENSION, UP TO 640 MG DAILY IN DIVIDED DOSES.
PARENTERAL, 1 TO 3 MG IV - NOT TO EXCEED 1 MG PER MINUTE.
NOTE: SHOULD EXCESSIVE BRADYCARDIA OCCUR,
ATROPINE 0.7 MG TO 1.0 MG SHOULD BE ADMINISTERED I.V.
DOSAGE FORM PROPRANOLOL HYDROCHLORIDE TABLETS 10 MG
PROPRANOLOL HYDROCHLORIDE TABLETS 40 MG *
PROPRANOLOL HYDROCHLORIDE INJECTION 1 MG PER ML, 1 ML AMPULE *
CAUTIONS PROPRANOLOL MAY PRECIPITATE CONGESTIVE HEART FAILURE.
INTERACTION WITH ANTIDIABETIC AGENTS: HYPOGLYCEMIA PRECIPITATED.
WITH INSULIN: HYPOGLYCEMIA PRECIPITATED.
WITH ISOPROTERENOL: BLOCKADE OCCURS AT PULMONARY AND CARDIAC BETA
RECEPTORS TO PRODUCE POTENTIALLY A LIFE-THREATENING SITUATION.

PROPYLTHIOURACIL USP
CATEGORY 58:36 ANTITHYROID HORMONE
REGIMEN ADULT MAINTENANCE DOSAGE: 100 MG TO 150 MG DAILY IN DIVIDED DOSES.
DOSAGE FORM PROPYLTHIOURACIL TABLETS USP 50 MG *
CAUTIONS PROPYLTHIOURACIL MAY CAUSE HYPOPROTHROMBINEMIA.

PROTAMINE SULFATE
CATEGORY 20:1 .08 ANTIHEPARIN AGENT
REGIMEN PARENTERAL, 50 MG OVER A PERIOD OF 1 TO 3 MINUTES, SLOW IV.
DOSAGE FORM PROTAMINE SULFATE INJECTION USP 10 MG PER ML, 25 ML VIAL
NOTE ITEM MUST BE REFRIGERATED.

PROTEIN HYDROLYSATE
TRADE NAME AMINOSYN
FREAMINE III
CATEGORY 40:20 CALORIC AGENT
REGIMEN VARIES WITH PATIENT AND CONDITIONS
FOR INFORMATION CONTACT PHARMACY IV SECTION.
DOSAGE FORM PROTEIN/AMINO ACID 8.5% INJECTION 500 ML *FREAMINE III*

AMINO ACIDS - ESSENTIAL	EACH 100 ML CONTAINS:		
ISOLEUCINE	590 MG	LEUCINE	770 MG
LYSINE	620 MG	METHIONINE	450 MG
PHENYLALANINE	480 MG	THREONINE	340 MG
TRYPTOPHAN	130 MG	VALINE	560 MG
AMINO ACIDS - NONESSENTIAL	EACH 100 ML CONTAINS:		
ALANINE	600 MG	ARGININE	810 MG
HISTIDINE	240 MG	PROLINE	950 MG
SERINE	500 MG	GLYCINE	1190 MG
CYSTEINE	LESS THAN 20 MG		
ELECTROLYTES	EACH LITER CONTAINS:		
SODIUM	10 MEQ	CHLORIDE	LESS THAN 2 MEQ
ACETATE	74 MEQ	PHOSPHATE	10 MM
OSMOLARITY	810 M OSM PER LITER		

AMINO ACID SOLUTION KIT *AMINOSYN*
EACH KIT CONTAINS:
CRYSTALLINE AMINO ACID SOLUTION 7% 500 ML
DEXTROSE INJECTION 50% 500 ML
NOTE NOTIFY PHARMACY OF INTENDED USE.

PROVENTIL - SEE ALBUTEROL

PROVERA - SEE MEDROXYPROGESTERONE

PSEUDOEPHEDRINE HYDROCHLORIDE
TRADE NAME ACTIFED
SUDAFED
CATEGORY 12:12 SYMPATHOMIMETIC-ADRENERGIC-AGENT
REGIMEN 60 MG UP TO FOUR TIMES DAILY
DOSAGE FORM PSEUDOEPHEDRINE HYDROCHLORIDE TABLETS 30 MG *SUDAFED*
PSEUDOEPHEDRINE HYDROCHLORIDE TABLETS 60 MG *SUDAFED*
PSEUDOEPHEDRINE HYDROCHLORIDE 60 MG AND TRIPROLIDINE 2.5 MG
TABLETS *ACTIFED*
PSEUDOEPHEDRINE HCL 30 MG AND TRIPROLIDINE 1.25 MG
PER 5 ML SYRUP *ACTIFED*

PSYLLIUM
TRADE NAME METAMUCIL
PERDIEM
CATEGORY 56:12 CATHARTICS AND LAXATIVES
REGIMEN BULK LAXATIVE: 4 GM TO 7 GM ONE TO THREE TIMES DAILY.
PERDIEM, ORAL: ONE TO TWO TEASPOONSFUL 1 TO 4 TIMES DAILY.
DOSAGE FORM PSYLLIUM HYDROPHILIC MUCILLOID 14 OZ

PYOPEN - SEE CARBENICILLIN

PYRANTEL PAMOATE
TRADE NAME ANTIMINTH

-CONTINUED- PYRANTEL PAMOATE
CATEGORY 8:0R ANTHELMINTIC
REGIMEN 1 ML PER 10 LBS OF BODY WEIGHT, MAXIMUM DOSAGE IS 20 ML
SINGLE DOSE ADMINISTRATION.
(FOR THE TREATMENT OF ASCARIS OR ENTEROBIUS)
NOTE: MAY BE TAKEN WITH MILK OR FRUIT JUICE.
DOSAGE FORM PYRANTEL PAMOATE ORAL SUSPENSION 50 MG PER ML, 60 ML

PYRIDIUM - SEE PHENAZOPYRIDINE

PYRIDOXINE HYDROCHLORIDE USP
TRADE NAME HEXABETALIN
VITAMIN B - 6
CATEGORY 88:08 VITAMIN B COMPLEX
REGIMEN 25 MG TO 100 MG DAILY
DOSAGE FORM PYRIDOXINE HYDROCHLORIDE TABLETS USP 50 MG
PYRIDOXINE HYDROCHLORIDE INJECTION USP 100 MG PER ML
5 ML VIAL

QUESTRAN - SEE CHOLESTYRAMINE RESIN

QUINAGLUTE - SEE QUINIDINE GLUCONATE

QUINIDINE
CATEGORY 24:04 CARDIAC DRUG
REGIMEN ORAL, 200 MG UP TO 6 TIMES DAILY AS NEEDED
DOSAGE FORM QUINIDINE SULFATE TABLETS 200 MG
CAUTIONS QUINIDINE MAY CAUSE EXACERBATION OF MYASTHENIA GRAVIS
INTERACTION WITH ACETAZOLAMIDE: ALKALINE URINE WILL INCREASE TUBULAR REABSORPTION OF QUINIDINE TO INCREASE BLOOD LEVELS OF QUINIDINE
WITH GALLAMINE: NEUROMUSCULAR BLOCKADE
WITH NEOSTIGMINE: ANTICHOLINERGIC EFFECT OF QUINIDINE DECREASES NEOSTIGMINE EFFECT
WITH PANCURONIUM: NEUROMUSCULAR BLOCKADE
WITH SODIUM BICARBONATE: ALKALINE URINE WILL INCREASE TUBULAR REABSORPTION OF QUINIDINE TO INCREASE BLOOD LEVELS OF QUINIDINE.
WITH SUCCINYLCHOLINE: NEUROMUSCULAR BLOCKADE.
WITH TUBOCURARINE: NEUROMUSCULAR BLOCKADE.

QUINIDINE GLUCONATE
TRADE NAME QUINAGLUTE
CATEGORY 24:04 CARDIAC DRUG
REGIMEN ORAL- 330 MG TWICE DAILY TO 600 MG 4 TIMES DAILY.
IM- INITIALLY 600 MG THEN 400 MG EVERY 2 HOURS AS NEEDED.
DOSAGE FORM QUINIDINE GLUCONATE 324 MG (330 MG) *QUINAGLUTE DURATABS*DURAQUIN*

QUININE
CATEGORY 8:20 PLASMODICIDE
REGIMEN ORAL: 200 MG TO 325 MG AT BEDTIME FOR LEG CRAMPS.
WHERE NECESSARY, INCREASE DOSE TO 200 TO 300 MG AFTER EVENING MEAL.
DOSAGE FORM QUININE SULFATE CAPSULES NF 325 MG

RABIES IMMUNE GLOBULIN (HUMAN)
TRADE NAME HYPERAB
CATEGORY 80:04 SERUMS

-CONTINUED- RABIES IMMUNE GLOBULIN (HUMAN)
REGIMEN 20 I.U. PER KG AS SOON AFTER EXPOSURE AS POSSIBLE
IMMEDIATELY FOLLOWED BY A COURSE OF RABIES VACCINE.
UP TO ONE-HALF (1/2) THE DOSE IS USED TO INFILTRATE THE WOUND.
THE REMAINING PORTION OF THE DOSE IS GIVEN I.M.
DOSAGE FORM RABIES IMMUNE GLOBULIN (HUMAN) 150 I.U. PER ML, 10 ML *
NOTE NOT CARRIED IN STOCK ... MUST BE SPECIAL ORDERED ... CONTACT PHARMACY.
ITEM MUST BE REFRIGERATED.

REGITINE - SEE PHENTOLAMINE MESYLATE

REGLAN - SEE METOCLOPRAMIDE

RESERPINE USP
TRADE NAME SERPASIL
CATEGORY 24:08 HYPOTENSIVE AGENT
REGIMEN ORAL, 0.25 TO 1 MG DAILY IN 2 OR 3 DIVIDED DOSES.
DOSAGE FORM RESERPINE TABLETS USP 0.25 MG
CAUTIONS RESERPINE MAY CAUSE NASAL CONGESTION, NIGHTMARES AND BREAST ENLARGMENT.
RESERPINE MAY CAUSE DROWSINESS.

RETIN-A - SEE TRETINOIN

RHO (D) IMMUNE SERUM GLOBULIN
TRADE NAME RHOGAM
CATEGORY 80:04 SERUMS
REGIMEN CONSULT PHARMACY FOR INDICATIONS AND DOSE.
DOSAGE FORM RHO (D) IMMUNE GLOBULIN, 1 ML *RHOGAM*GAMULIN RH*
NOTE RHOGAM IS STOCKED IN THE LAB.

RIFADIN - SEE RIFAMPIN

RIFAMPIN
TRADE NAME RIFADIN
CATEGORY 08:16 ANTITUBERCULARS
REGIMEN 600 MG ONCE DAILY
DOSAGE FORM RIFAMPIN CAPSULES 300 MG
INTERACTION WITH ANTICOAGULANTS, ORAL: INDUCTION OF MICROSOMAL ENZYMES TO DECREASE
ANTICOAGULANT EFFECT.
WITH CONTRACEPTIVES, ORAL: INCREASE ESTROGEN METABOLISM TO DIMINISH
CONTRACEPTIVE EFFICACY.
WITH PAS: PAS IMPEDES GI ABSORPTION OF RIFAMPIN *THE DOSAGE INTERVAL
BETWEEN THESE SHOULD BE ABOUT TWELVE (12) HOURS.
WITH PROBENECID: DECREASE HEPATIC UPTAKE OF RIFAMPIN TO INCREASE
TOXICITY OF SAME.

RITALIN - SEE METHYLPHENIDATE HYDROCHLORIDE

RITODRINE
TRADE NAME YUTOPAR
CATEGORY 12:12 SYMPATHOMIMETIC -ADRENERGIC- AGENT
REGIMEN PARENTERAL: 0.1 MG PER MINUTE - GRADUAL INCREASE OF 0.05 MG PER MINUTE.
I.V.: INITIALLY TO ARREST PREMATURE LABOR, CONTINUED FOR 12 HOURS
AFTER CONTRACTIONS HAVE STOPPED, THEN GIVEN ORALLY.
USE AS DIRECTED FOR PREMATURE LABOR.

-CONTINUED- RITODRINE
ORAL: 10 MG - 30 MINUTES BEFORE TERMINATION OF IV THERAPY.
10 MG EVERY 2 HOURS FOR 24 HOURS, THEN 10 TO 20 MG EVERY 4 TO 6 HOURS
FIRST DRUG APPROVED BY FDA SPECIFICALLY FOR USE IN PREMATURE LABOR.
NOTE: TOTAL DAILY DOSE SHOULD NOT EXCEED 120 MG.
DOSAGE FORM RITODRINE HYDROCHLORIDE TABLETS 10 MG *YUTOPAR*
RITODRINE HYDROCHLORIDE INJECTION 10 MG PER ML, 5 ML AMPUL *YUTOPAR*
CAUTIONS RITODRINE IS CONTRAINDICATED BEFORE 20TH WEEK OF PREGNANCY.
RITODRINE ADMINISTERED CONCOMITANTLY WITH CORTICOSTEROIDS
MAY CAUSE PULMONARY EDEMA.
INTERACTION WITH CORTICOSTEROIDS: CONCOMITANT USE MAY LEAD TO PULMONARY EDEMA.
WITH BETA-ADRENERGIC BLOCKING AGENTS: INHIBIT ACTION OF RITODRINE.
WITH SURGERY ANESTHETICS: POSSIBLE POTENTIATED HYPOTENSIVE EFFECTS.
WITH SYMPATHOMIMETICS: POTENTIATION OF SYMPATHOMIMETIC EFFECTS.

ROBAXIN - SEE METHOCARBAMOL

ROBINUL - SEE GLYCOPYRROLATE

ROBITUSSIN - SEE GUAIFENESIN

ROBITUSSIN DM - SEE GUAIFENESIN

RUBRAMIN - SEE CYANOCOBALAMIN

SALICYLIC ACID USP
TRADE NAME FOSTEX
LACTISAL (SALICYLIC ACID COMPOUND COLLODION)
SALICYLIC ACID PLASTER
CATEGORY 84:28 KERATOLYTIC AGENT
REGIMEN ACNE SOLUTION: APPLY ONCE OR TWICE A DAY.
TOPICAL: TWO TO FOUR DROPS DIRECTLY ON WART ONCE DAILY.
DOSAGE FORM SALICYLIC ACID PLASTER USP 40% *MEDIPLAST*
SALICYLIC ACID 2%, SULFUR 2% IN CAKE SOAP *FOSTEX SOAP*
SALICYLIC ACID 20% IN FLEXIBLE COLLODION *SALLACELL*

SALLACOLL - SEE SALICYLIC ACID

SALSALATE
TRADE NAME DISALCID
CATEGORY 28:08.04 NONSTEROIDAL ANTI-INFLAMMATORY AGENTS
REGIMEN ORAL: 325 MG TO 3 GM TWO OR THREE TIMES DAILY.
DOSAGE FORM SALSALATE TABLETS 500 MG *DISALCID*

SATURATED SOLUTION OF POTASSIUM IODIDE - SEE POTASSIUM IODIDE USP

SEBULEX - SEE SALICYLIC ACID AND/OR SULFUR

SEBULYTIC - SEE SALICYLIC ACID AND/OR SULFUR (AS SEBULEX)

SEBUTONE - SEE COAL TAR AND/OR SULFUR

SECOBARBITAL SODIUM USP
TRADE NAME SECONAL
SOLUBLE SECOBARBITAL

-CONTINUED- SECOBARBITAL SODIUM USP
CATEGORY 28:24 SEDATIVE AND HYPNOTIC
REGIMEN ADULT HYPNOTIC: 100 MG TO 200 MG AS REQUIRED.
DOSAGE FORM SODIUM SECOBARBITAL CAPSULES USP 100 MG
NOTE SCHEDULE II CONTROLLED MEDICATION.
INTERACTION WITH ALCOHOL, ACUTE: REDUCED METABOLISM TO ENHANCE CNS DEPRESSION.
WITH ALCOHOL, CHRONIC: ENHANCED METABOLISM TO DIMINISH SEDATIVE EFFECT.
WITH ANTICOAGULANTS, ORAL: INDUCTION OF MICROSOMAL ENZYMES TO DECREASE WARFARIN EFFECT.
WITH ANTIDEPRESSANTS, TRICYCLIC: INDUCTION OF MICROSOMAL ENZYMES TO DECREASE ANTIDEPRESSANT EFFECTS.
WITH CORTICOSTEROIDS: INDUCTION OF MICROSOMAL ENZYMES TO DECREASE STEROID EFFECT.
WITH TETRACYCLINES: INDUCTION OF MICROSOMAL ENZYMES TO DECREASE DOXYCYCLINE ACTIVITY.

SECONAL - SEE SECOBARBITAL SODIUM

SELENIUM SULFIDE USP
TRADE NAME SELSUN
CATEGORY 84:04.16 SKIN AND MUCOUS MEMBRANE MISC. LOCAL ANTI-INFECTIVE
DOSAGE FORM SELENIUM SULFIDE DETERGENT SUSPENSION USP 2.5%, 120 ML

SELSUN - SEE SELENIUM SULFIDE

SEPTRA - SEE TRIMETHOPRIM AND/OR SULFAMETHOXAZOLE

SEPTRA DS - SEE TRIMETHOPRIM AND/OR SULFAMETHOXAZOLE

SERAX - SEE OXAZEPAM

SERPASIL - SEE RESERPINE

SHOHL'S SOLUTION - SEE SODIUM CITRATE

SILVADENE - SEE SILVER SULFADIAZINE

SILVER NITRATE USP
TRADE NAME LUNAR CAUSTIC
CATEGORY 84:28 KERATOLYTIC AGENT
DOSAGE FORM SILVER NITRATE APPLICATORS, 6 INCH
SILVER NITRATE 1% MAX AMPULES OPHTHALMIC

SILVER SULFADIAZINE
TRADE NAME SILVADENE
CATEGORY 84:04.16 SKIN AND MUCOUS MEMBRANE MISCELLANEOUS LOCAL ANTI-INFECTIVES
DOSAGE FORM SILVER SULFADIAZINE CREAM 1% (SILVER SULFADIAZINE, MICRONIZED 1%)
HYDROPHILIC-WATER WASHABLE-BASE WHICH CONTAINS:
WHITE PETROLATUM, STEARYL ALCOHOL, ISOPROPYL MYRISTATE, SORBITAN MONO-OLEATE, POLYOXYL 40 STEARATE, PROPYLENE GYLCOL, WATER, METHYPARABEN
CAUTIONS SILVER SULFADIAZINE MAY CAUSE PRIMAQUINE-SENSITIVE HEMOLYSIS, AND KERNICTERUS IN NEWBORNS.

SIMETHICONE

-CONTINUED- SIMETHICONE
TRADE NAME MYLANTA
MYLANTA II
MYLICON
CATEGORY 56:10 ANTIFLATULANT
REGIMEN ORAL: 40 TO 80 MG AFTER EACH MEAL AND AT BEDTIME.
NOTE: TABLETS SHOULD BE CHEWED THOROUGHLY BEFORE SWALLOWING.
DOSAGE FORM SIMETHICONE CHEWABLE TABLETS 40 MG *MYLICON*
SIMETHICONE WITH MAGNESIUM AND ALUMINUM HYDROXIDES *MYLANTA*
EACH 5 ML OR TABLET CONTAINS:
SIMETHICONE 20 MG
MAGNESIUM HYDROXIDE 200 MG
ALUMINUM HYDROXIDE 200 MG
SIMETHICONE WITH MAGNESIUM AND ALUMINUM HYDROXIDES *MYLANTA II*
EACH 5 ML CONTAINS:
SIMETHICONE 30 MG
MAGNESIUM HYDROXIDE 400 MG
ALUMINUM HYDROXIDE 400 MG
NOTE MYLANTA TABLETS ARE INDIVIDUALLY SEALED IN BOXES OF 100'S.
LIQUIDS ARE PACKAGED IN 150 ML BOTTLES.
GELUSIL AND MYLANTA ARE CONSIDERED EQUIVALENT.

SINEQUAN - SEE DOXEPIN HCL

SLOW-K - SEE POTASSIUM CHLORIDE

SNAKE BITE ANTIVENIN - SEE CROTALINE ANTIVENIN, POLYVALENT

SODIUM BICARBONATE USP
CATEGORY 40:08 ALKALINIZING AGENT
DOSAGE FORM SODIUM BICARBONATE INJECTION 7.5% 50 ML PREFILLED SYRINGE
44.6 MEQ PER 50 ML
SODIUM BICARBONATE INJECTION 4.2%, PEDIATRIC, 10 ML SYRINGE
5 MEQ PER 10 ML

SODIUM CHLORIDE USP
TRADE NAME NORMAL SALINE
CATEGORY 40:12 REPLACEMENT THERAPY
40:36 IRRIGATING SOLUTIONS
DOSAGE FORM SODIUM CHLORIDE INJECTION USP 0.9%, 5 ML
SODIUM CHLORIDE INJECTION 0.9%, 50 ML BAG (IVPB)
SODIUM CHLORIDE INJECTION 0.9%, 100 ML BAG (IVPB)
SODIUM CHLORIDE INJECTION 0.9% 250 ML
SODIUM CHLORIDE INJECTION 0.9% 1000 ML
NOTE SODIUM CHLORIDE IRRIGATION IS AVAILABLE FROM CENTRAL SUPPLY ONLY.

SODIUM CITRATE
TRADE NAME BICITRA
SHOHLS SOLUTION
CATEGORY 40:08 ALKALINIZING AGENT
REGIMEN ADULT- 1-2 GM EVERY FOUR HOURS.
DOSAGE FORM SODIUM CITRATE 500 MG AND CITRIC ACID 300 MG PER 5 ML SOLN, 480 ML
BICITRA

SODIUM DIPHENYLHYDANTOIN - SEE PHENYTOIN

SODIUM HEPARIN - SEE HEPARIN SODIUM

SODIUM LEVOTHYROXINE - SEE LEVOTHYROXINE, SODIUM

SODIUM LIOTHYRONINE - SEE LIOTHYRONINE SODIUM

SODIUM NAFCILLIN - SEE NAFCILLIN

SODIUM PHOSPHATE (CATHARTIC)
TRADE NAME FLEET ENEMA
TRAVAD
CATEGORY 56:12 CATHARTIC
DOSAGE FORM SODIUM PHOSPHATE-SODIUM CITRATE SOLUTION DISPOSABLE ENEMA CONTAINS TUBING AND PRELUBRICATED RECTAL TIP *TRAVAD* 4 1/2 OZ
SODIUM BIPHOSPHATE AND SODIUM PHOSPHATE ENEMA, 135 ML *FLEET*
SODIUM BIPHOSPHATE AND SODIUM PHOSPHATE WITH MINERAL OIL, 135 ML *FLEET WITH MINERAL OIL*

SODIUM SECOBARBITAL - SEE SECOBARBITAL, SODIUM

SODIUM SULFACETAMIDE - SEE SULFACETAMIDE, SODIUM

SODIUM WARFARIN - SEE WARFARIN, SODIUM

SOLGANAL - SEE AUROTHIOGLUCOSE USP

SOLU-CORTEF - SEE HYDROCORTISONE USP

SOLU-MEDROL - SEE METHYLPREDNISOLONE

SORBITRATE - SEE ISOSORBIDE DINITRATE

SPECTINOMYCIN
TRADE NAME TROBICIN
CATEGORY 8:12.28 OTHER ANTIBIOTICS
REGIMEN IM, 2 GRAMS (FOR ANTIBIOTIC RESISTANT STRAINS, 4 GRAMS IM)
DOSAGE FORM SPECTINOMYCIN HYDROCHLORIDE POWDER FOR INJECTION, 2 GM VIAL

SPINHALER - SEE CROMOLYN SODIUM

SPIRONOLACTONE USP
TRADE NAME ALDACTONE
CATEGORY 40:28 DIURETIC
REGIMEN ORAL: 25 MG TO 100 MG DAILY IN DIVIDED DOSES.
DOSAGE FORM SPIRONOLACTONE TABLETS USP 25 MG *ALDACTONE*
CAUTIONS SPIRONOLACTONE MAY CAUSE BREAST ENLARGEMENT.
INTERACTION WITH POTASSIUM SALTS: ADDITIVE TO PRODUCE HYPERKALEMIA.
WITH SALICYLATES: DECREASED NATRIURESIS POSSIBLE.

S.S.K.I. - SEE POTASSIUM IODIDE

STANDARD DIET
TRADE NAME VIVONEX
CATEGORY 40:20 CALORIC AGENT
DOSAGE FORM STANDARD DIET, A COMPLETE ELEMENTAL LOW RESIDUE FOOD, 80 GMS PER

-CONTINUED-

STANDARD DIET
PACKET, 6 PACKETS PER BOX, FLAVORED AND UNFLAVORED, *VIVONEX SOLUBLE POWDER* EMPTY PACKET INTO 12 OZ GLASS AND ADD 8 1/2 OZ WATER, STIR VIGOROUSLY OR BLEND AT A MEDIUM SPEED. PREPARE A SINGLE DAYS SUPPLY ONLY AND REFRIGERATE ONCE MIXED. CONTENTS OF EACH PACKET: 300 KILOCALORIES, AVAILABLE NITROGEN 980 MG, FAT 435 MG AND CARBOHYDRATES 7-9 GRAMS.
NOTE USE IS AUTHORIZED FOR INPATIENTS.

STANNOUS FLUORIDE
TRADE NAME GEL-KAM
CATEGORY 34:00 DENTAL AGENTS
92:00 UNCLASSIFIED AGENT
DOSAGE FORM STANNOUS FLUORIDE GEL 0.4%, 69 ML *GEL-KAM*

STAPHCILLIN - SEE METHICILLIN SODIUM

STATICIN - SEE ERYTHROMYCIN

STELAZINE - SEE TRIFLUOPERAZINE

STOXIL - SEE IDOXURIDINE

STUART PRENATAL - SEE VITAMINS, PRENATAL

SUBLIMAZE - SEE FENTANYL

SUCCINYLCHOLINE CHLORIDE USP
TRADE NAME ANECTINE
SUCOSTRIN
CATEGORY 12:20 SKELETAL MUSCLE RELAXANT
REGIMEN PARENTERAL, 20 MG IV
NOTE: NEOSTIGMINE AND EDROPHONIUM ARE CONTRAINDICATED AS ANTIDOTES IN PHASE ONE BLOCK.
DOSAGE FORM SUCCINYLCHOLINE CHLORIDE INJECTION USP 20 MG PER ML, 10 ML VIAL
SUCCINYLCHOLINE CHLORIDE INJECTION USP 1 GM POWDER-STERILE-FLO-PACK
NOTE THE 10 ML VIAL MUST BE REFRIGERATED
INTERACTION WITH COLISTIMETHATE: NEUROMUSCULAR BLOCKADE.
WITH GENTAMICIN: NEUROMUSCULAR BLOCKADE.
WITH KANAMYCIN: NEUROMUSCLLAR BLOCKADE.
WITH NEOMYCIN: NEUROMUSCULAR BLOCKADE.
WITH POLYMYXIN B: NEUROMUSCULAR BLOCKADE.
WITH QUINIDINE: NEUROMUSCULAR BLOCKADE.
WITH STREPTOMYCIN: NEUROMLSCULAR BLOCKADE.
WITH ECHOTHIOPHATE: ANTICHOLINESTERASE AGENTS DECREASE PSEUDOCHOLINESTERASE ACTIVITY TO THE POINT THAT SUCCINYLCHOLINE ADMINISTRATION MAY CAUSE DEATH.
WITH NEOSTIGMINE: ANTICHOLINESTERASE AGENTS DECREASE PSEUDOCHOLINESTERASE ACTIVITY TO THE POINT THAT SUCCINYLCHOLINE ADMINISTRATION MAY CAUSE DEATH.
WITH PHOSPHOLINE IODIDE: ANTICHOLINESTERASE AGENTS DECREASE PSEUDOCHOLINESTERASE ACTIVITY TO THE POINT THAT SUCCINYLCHOLINE ADMINISTRATION MAY CAUSE DEATH.
WITH PHYSOSTIGMINE: ANTICHOLINESTERASE AGENTS DECREASE

-CONTINUED- SUCCINYLCHOLINE CHLORIDE USP
PSEUDOCHOLINESTERASE ACTIVITY TO THE POINT THAT SUCCINYLCHOLINE ADMINISTRATION MAY CAUSE DEATH.
WITH PYRIDOSTIGMINE: ANTICHOLINESTERASE AGENTS DECREASE PSEUDOCHOLINESTERASE ACTIVITY TO THE POINT THAT SUCCINYLCHOLINE ADMINISTRATION MAY CAUSE DEATH.

SUCRALFATE
TRADE NAME CARAFATE
CATEGORY 56:40 MISCELLANEOUS GASTRE-INTESTINAL AGENT (ANTIULCER AGENT)
REGIMEN ORAL: ONE GRAM FOUR TIMES DAILY ONE HOUR BEFORE MEALS AND AT BEDTIME.
NOTE: TREATMENT IS USUALLY FOUR TO EIGHT WEEKS.
ANTACIDS MAY BE PRESCRIBED AS NEEDED FOR RELIEF OF PAIN.
ANTACIDS SHOULD NOT BE TAKEN ONE-HALF HOUR BEFORE OR AFTER SUCRALFATE.
WHILE HEALING WITH SUCRALFATE MAY OCCUR DURING THE FIRST WEEK OR TWO, TREATMENT SHOULD BE CONTINUED FOR FOUR TO EIGHT WEEKS UNLESS HEALING HAS BEEN DEMONSTRATED BY X-RAY OR ENDOSCOPIC EXAMINATION.
DOSAGE FORM SUCRALFATE TABLETS 500 MG *CARAFATE*
SUCRALFATE TABLETS 1 GM *CARAFATE*
CAUTIONS SUCRALFATE SHOULD NOT BE PRESCRIBED WITH CIMETIDINE.

SUDAFED - SEE PSEUDOEPHEDRINE HYDROCHLORIDE

SULAMYD - SEE SULFACETAMIDE SODIUM

SULFACETAMIDE (EENT)
TRADE NAME SULAMYD
CATEGORY 52:04.08 EENT SULFONAMIDE
REGIMEN EYE DROPS - ONE OR TWO DROPS EVERY 2 HOURS.
DOSAGE FORM SODIUM SULFACETAMIDE OPHTHALMIC SOLUTION 15%, 15 ML *ISOPTO CETAMIDE*
SODIUM SULFACETAMIDE OPHTHALMIC OINTMENT 10%, 3.5 GM *SULAMYD*

SULFAMETHOXAZOLE
TRADE NAME BACTRIM
BACTRIM DS
SEPTRA
SEPTRA DS
CATEGORY 8:24 SULFONAMIDES
REGIMEN ORAL, ONE TABLET EVERY 12 HOURS (FOR DS FORMS)
DOSAGE FORM SULFAMETHOXAZOLE 800 MG AND TRIMETHOPRIM 160 MG (SCORED TABLET) *BACTRIM DS, SEPTRA DS*
SULFAMETHOXAZOLE 200 MG PER 5 ML AND TRIMETHOPRIM 40 MG PER 5 ML SUSPENSION *BACTRIM SUSPENSION, SEPTRA SUSPENSION*
CAUTIONS NOT RECOMMENDED FOR USE DURING PREGNANCY OR WHILE LACTATING.
FOR CHILDREN UNDER 2 MONTHS OF AGE - IS EXCRETED IN BREAST MILK.
SULFAMETHOXAZOLE MAY CAUSE PRIMAQUINE-SENSITIVE HEMOLYSIS, AND KERNICTERUS IN NEWBORNS.

SULFANILAMIDE
TRADE NAME AVC CREAM
CATEGORY 84:04.16 SKIN AND MUCOUS MEMBRANE MISCELLANEOUS LOCAL ANTI-INFECTIVES
REGIMEN ONE SUPPOSITORY OR APPLICATORFUL ONCE OR TWICE DAILY
DOSAGE FORM SULFANILAMIDE, AMINACRINE HYDROCHLORIDE, AND ALLANTOIN VAGINAL CREAM
60 GRAM TUBE.
120 GRAM TUBE (DELIVERS APPROXIMATELY 18 DOSES)

-CONTINUED- SULFANILAMIDE
CONTAINS:
SULFANILAMIDE 15.0%
AMINACRINE HYDROCHLORIDE 0.2%
ALLANTOIN 2.0%
NOTE ALSO SEE SULFATHIAZOLE FOR SULTRIN VAGINAL CREAM.

SULFASALAZINE
TRADE NAME AZULFIDINE
CATEGORY 8:24 SULFONAMIDE
REGIMEN 1 GM 4 TO 6 TIMES DAILY
DOSAGE FORM SULFASALAZINE TABLETS 500 MG
CAUTIONS NOT RECOMMENDED FOR USE DURING PREGNANCY OR WHILE LACTATING.
SULFASALAZINE MAY CAUSE PRIMAQUINE-SENSITIVE HEMOLYSIS AND KERNICTERUS IN NEWBORNS.

SULFATHIAZOLE
TRADE NAME SULTRIN
CATEGORY 84:04.16 SKIN AND MUCOUS MEMBRANE MISC. LOCAL ANTI-INFECTIVE
DOSAGE FORM SULFATHIAZOLE COMPOUND VAGINAL CREAM *SULTRIN*
TRIPLE SULFA CREAM
EACH 78 GRAM TUBE CONTAINS: (DELIVERS APPROXIMATELY 15 DOSES)
SULFATHIAZOLE 3.42%
SULFACETAMIDE 2.86%
SULFABENZAMIDE 3.70%
UREA 0.64%
CAUTIONS NOT RECOMMENDED FOR USE DURING PREGNANCY OR WHILE LACTATING.
COMPETES WITH BILIRUBIN FOR PROTEIN BINDING IN INFANTS.

SULFINPYRAZONE
TRADE NAME ANTURANE
CATEGORY 40:40 URICOSURIC AGENTS
REGIMEN INITIALLY, 100 MG TO 200 MG TWICE DAILY DURING THE FIRST WEEK.
MAY INCREASE TO 200 MG TO 400 MG TWICE DAILY THEREAFTER.
ORAL, MAINTENANCE: 200 MG FOUR (4) TIMES A DAY.
MAY CAUSE GI UPSET - TAKE WITH FOOD, MILK, OR ANTACIDS.
DOSAGE FORM SULFINPYRAZONE TABLETS 100 MG *ANTURANE*

SULFISOXAZOLE (SYSTEMIC)
TRADE NAME GANTRISIN
CATEGORY 8:24 SULFONAMIDE
REGIMEN ORAL, 2-4 GM (LOADING) FOLLOWED BY 4-8 GM DAILY IN 4-6 DIVIDED DOSES.
NOTE: MAKE SURE PATIENT DRINKS PLENTY OF FLUIDS.
DOSAGE FORM SULFISOXAZOLE TABLETS USP 500 MG *GANTRISIN*
SULFISOXAZOLE ACETYL PEDIATRIC SUSPENSION 500 MG PER 5 ML *GANTRISIN*
CAUTIONS SULFISOXAZOLE MAY CAUSE PRIMAQUINE-SENSITIVE HEMOLYSIS, AND KERNICTERUS IN NEWBORNS.

SULFUR
TRADE NAME FOSTEX SOAP
SEBULEX
SEBUTONE
CATEGORY 84:20 SKIN AND MUCOUS MEMBRANE DETERGENT
DOSAGE FORM SULFUR 2%, SALICYLIC ACID 2% SOAP FREE SHAMPOO 120 ML *SEBULEX*SEBRA*
SULFUR 2%, SALICYLIC ACID 2%, AND COAL TAR 0.5% SHAMPOO,120ML*SEBUTONE*

-CONTINUED- SULFUR
SULFUR 2%, SALICYLIC ACID 2% CAKE 3 3/4 OZ *FOSTEX SOAP*

SULINDAC
TRADE NAME CLINORIL
CATEGORY 28108.04 NONSTEROID ANTI-INFLAMMATORY AGENTS
REGIMEN IN OSTEOARTHRITIS, RHEUMATOID ARTHRITIS, AND ANKYLOSING SPONDILITIS,
THE RECOMMENDED STARTING DOSAGE IS 150 MG TWO TIMES DAILY.
ORAL: 150 MG OR 200 MG TWICE A DAY (WITH FOOD).
IN ACUTE PAINFUL SHOULDER AND ACUTE GOUTY ARTHRITIS,
DOSAGE FORM SULINDAC 150 MG. TABLETS *CLINORIL*
CAUTIONS SULINDAC MAY CAUSE EXACERBATION OF PEPTIC ULCER.

SULTRIN - SEE SULFATHIAZOLE

SUMYCIN - SEE TETRACYCLINE

SUS-PHRINE - SEE EPINEPHRINE

SUSTACAL - SEE DIETARY FOOD FORMULAS AND FEED SUPPLEMENTS

SYNALAR - SEE FLUOCINOLONE

SYNTHROID - SEE LEVOTHYROXINE SODIUM

TAGAMET - SEE CIMETIDINE

TALWIN - SEE PENTAZOCINE

TAPAZOLE - SEE METHIMAZOLE

TEGRETOL - SEE CARBAMAZEPINE

TEMARIL - SEE TRIMEPRAZINE TARTRATE

TENSILON - SEE EDROPHONIUM CHLORIDE

TERBUTALINE SULFATE
TRADE NAME BRETHINE
CATEGORY 12112 SYMPATHOMIMETIC (ADRENERGIC) AGENTS
REGIMEN ORAL- ADULT, 5 MG 3 TIMES A DAY AT 6 HOUR INTERVALS.
ORAL-PEDIATRIC, BETWEEN 12-15 YRS OLD,2.5 MG 3 TIMES DAILY.
PARENTERAL, SUBCUTANEOUS: 0.25 MG. (SUBCUTANEOUS USE ONLY)
DOSAGE FORM TERBUTALINE SULFATE TABLETS 5 MG

TERPIN HYDRATE NF
TRADE NAME ETH WITH CODEINE
CATEGORY 48100 EXPECTORANT AND COUGH PREPARATION
DOSAGE FORM TERPIN HYDRATE WITH CODEINE ELIXIR NF 10 MG OF CODEINE PER 5 ML, 120 ML
NOTE ETH WITH CODEINE IS A SCHEDULE V CONTROLLED MEDICATION.

TESSALON - SEE BENZONATATE

TES-TAPE - SEE GLUCOSE OXIDASE REAGENT AND/OR URINE CONTENTS DIAGNOSTIC

TRADE NAME DELADUMONE OB
METHYLTESTOSTERONE
CATEGORY 68300 ANDROGEN
REGIMEN 6[illegible]/CYPIONATE, BUNUCH:IDISM/EUNUCHISM: 10 TO 25 MG 2 OR 3
ENANTHATE/CYPIONATE, EUNUCHOIDISM/EUNUCHISM: 200 - 400 MG EVERY 4 WKS
DOSAGE FORM TESTOSTERONE ENANTHATE 180 MG PER ML AND ESTRADIOL VALERATE 8 MG PER ML
INJECTION IN SESAME SEED OIL, 5 ML SINGLE DOSE VIAL *DELADUMONE OB*
TESTOSTERONE CYCLOPENTYLPROPIONATE INJECTION IN COTTONSEED
OIL, 50 MG PER ML, 10 ML *DEPOTESTOSTERONE*
TESTOSTERONE AQUEOUS INJECTION, 100 MG PER ML, 10 ML VIAL

TETRACYCLINE (SYSTEMIC)
TRADE NAME ACHROMYCIN
CATEGORY 68124 TETRACYCLINE
REGIMEN ORAL- ADULT, 250 MG EVERY 6 HOURS ON AN EMPTY STOMACH.
ORAL-PEDIATRIC, 25-50 MG PER KG IN DIVIDED DOSES.
DOSAGE FORM TETRACYCLINE HYDROCHLORIDE CAPSULES 250 MG
TETRACYCLINE HYDROCHLORIDE ORAL SUSPENSION USP, 125 MG PER 5 ML
CAUTIONS TETRACYCLINE MAY CAUSE DISCOLORATION AND DAMAGE OF THE TEETH OF THE
FETUS OR CHILD WHEN GIVEN AT ANY TIME FROM THE FOURTH MONTH OF
GESTATION TO THE EIGHTH YEAR OF LIFE.
INTERACTION WITH ANTACIDS: BIVALENT AND TRIVALENT CATIONS INHIBIT
GI ABSORPTION OF TETRACYCLINE.
WITH BARBITURATES: MICROSOMAL ENZYME INDUCTION TO DECREASE TETRACYCLINE
ACTIVITY POSSIBLY.
WITH CARBAMAZEPINE: MICROSOMAL ENZYME INDUCTION TO DECREASE
TETRACYCLINE ACTIVITY POSSIBLY.
WITH ORAL IRON PRODUCTS: DECREASED GI ABSORPTION OF TETRACYCLINES.
WITH METHOXYFLURANE: COMBINED USE MAY RESULT IN NEPHROTOXICITY.
WITH PENICILLINS: IMPAIRS EFFECTIVENESS OF PENICILLINS
BY INTERFERENCE WITH BACTERICIDAL ACTIVITY.

TETRACYN - SEE TETRACYCLINE

TETRAHYDROZOLINE
TRADE NAME VISINE
CATEGORY 52132 EENT VASOCONSTRICTOR
REGIMEN 2 OR 4 DROPS EVERY 3 HOURS
DOSAGE FORM TETRAHYDROZOLINE HYDROCHLORIDE OPHTHALMIC SOLUTION 0.05%, 15 ML
VISINE

THEO-DUR - SEE THEOPHYLLINE

THEOPHYL-SR - SEE THEOPHYLLINE

THEOPHYLLINE
TRADE NAME ELIXOPHYLLIN
ELIXOPHYLLIN-SR
ELIXICON
THEO-DUR
THEOPHYL-SR
CATEGORY 86100 SPASMOLYTIC AGENTS

-CONTINUED- THEOPHYLLINE
REGIMEN NOTE: DOSE MUST BE INDIVIDUALIZED.
ELIXICON, ADULT- 10 ML 3 TIMES A DAY.
CHILDREN- 5 ML PER 25 KG OF BODY WEIGHT EVERY 6 HOURS.
ELIXOPHYLLIN-SR 125, CHILDREN 6 TO 12, 1 CAPSULE EVERY 12 HOURS
THEOPHYL-SR 125 MG, CHILDREN 6-12, 1 CAPSULE EVERY 12 HOURS.
DOSAGE FORM THEOPHYLLINE TIME-RELEASE CAPSULES 125 MG *THEO-DUR SPRINKLE*
*ELIXOPHYLLIN-SR*SLOPHYLLIN (GYROCAPS)*THEOPHYL-SR*
THEOPHYLLINE TIMED-RELEASE TABLETS 300 MG*CONSTANT-T*SUSTAIRE*THEO-DUR*
NOTE THEO-DUR AND SUSTAIRE ARE CONSIDERED EQUIVALENT.
CAUTIONS INCREASED DIURESIS IF GIVEN WITH FUROSEMIDE.
INTERACTION WITH CLINDAMYCIN: INCREASED THEOPHYLLINE PLASMA LEVELS.
WITH EPHEDRINE: SYNERGISTIC TOXICITY.
WITH ERYTHROMYCIN: INCREASES THEOPHYLLINE BLOOD LEVELS.
WITH PROPRANOLOL: ANTAGONISM OF PROPRANOLOL.
WITH RESERPINE: RESERPINE INDUCED TACHYCARDIA.
WITH CARDIAC GLYCOSIDES: ENHANCED MYOCARDIAL SENSITIVITY TO GLYCOSIDES.
WITH LITHIUM CARBONATE: INCREASED EXCRETION OF LITHIUM CARBONATE.

THIAMINE HYDROCHLORIDE USP
TRADE NAME BETALIN-S
VITAMIN B - 1
CATEGORY 88:08 VITAMIN B COMPLEX
REGIMEN ORAL AND PARENTERAL, REQUIREMENT, 1 MG TO 2 MG
THERAPEUTIC, 5 MG TO 50 MG
DOSAGE FORM THIAMINE HYDROCHLORIDE TABLETS USP 50 MG
THIAMINE HYDROCHLORIDE INJECTION USP 100 MG PER ML, 10 ML *BETALIN-S* *
NOTE FOR OTHER THIAMINE CONTAINING VITAMINS SEE VITAMINS, B COMPLEX: VITAMINS, MULTIPLE: AND VITAMINS, PRENATAL.

THIMEROSAL
TRADE NAME MERTHIOLATE
CATEGORY 84:04.16 SKIN AND MUCOUS MEMBRANE LOCAL ANTI-INFECTIVE
DOSAGE FORM THIMEROSAL TINCTURE 1:1000

THIOPENTAL SODIUM USP
TRADE NAME PENTOTHAL SODIUM
CATEGORY 28:04 GENERAL ANESTHETIC
28:24 SEDATIVE AND HYPNOTIC
DOSAGE FORM SODIUM THIOPENTAL ANESTHESIA KIT, 1 GM
NOTE THIOPENTAL IS A SCHEDULE III CONTROLLED MEDICATION.
INTERACTION WITH ALCOHOL, ACUTE: REDUCED METABOLISM TO ENHANCE CNS DEPRESSION.
WITH ALCOHOL, CHRONIC: ENHANCED METABOLISM TO DIMINISH SEDATIVE EFFECT.
WITH ANTICOAGULANT, ORAL: INDUCTION OF MICROSOMAL ENZYMES TO DECREASE WARFARIN EFFECT.
WITH ANTIDEPRESSANTS, TRICYCLIC: INDUCTION OF MICROSOMAL ENZYMES TO DECREASE ANTIDEPRESSANT EFFECTS.
WITH CORTICOSTEROIDS: INDUCTION OF MICROSOMAL ENZYMES TO DECREASE STEROID EFFECT.
WITH TETRACYCLINES: INDUCTION OF MICROSOMAL ENZYMES TO DECREASE DOXYCYCLINE ACTIVITY.

THIORIDAZINE HYDROCHLORIDE
TRADE NAME MELLARIL
CATEGORY 28:16.08 TRANQUILIZER

-CONTINUED- THIORIDAZINE HYDROCHLORIDE
REGIMEN 10-100 MG 3 OR 4 TIMES DAILY
DOSAGE FORM THIORIDAZINE HYDROCHLORIDE TABLETS 10 MG
THIORIDAZINE HYDROCHLORIDE TABLETS 25 MG
THIORIDAZINE HYDROCHLORIDE TABLETS 100 MG
CAUTIONS THIORIDAZINE MAY CAUSE DROWSINESS.
NO ALCOHOL SHOULD BE CONSUMED WHILE TAKING THIORIDAZINE.

THORAZINE - SEE CHLORPROMAZINE HYDROCHLORIDE

THROAT LOZENGE - SEE CETYLPYRIDIUM AND/OR PHENOL

THYMOL USP
CATEGORY 84:04.08 SKIN AND MUCOUS MEMBRANE FUNGICIDE
REGIMEN APPLY TO FINGERNAILS
DOSAGE FORM THYMOL 4% IN CHLOROFORM

THYROID USP
TRADE NAME DESICCATED THYROID
CATEGORY 68:36 THYROID HORMONE
REGIMEN ORAL: 32 MG TO 65 MG DAILY (OR LARGER DOSE AS NEEDED)
DOSAGE FORM THYROID TABLETS USP 30 MG (32 MG)
THYROID TABLETS USP 60 MG (65 MG)

THYROXINE SODIUM - SEE LEVOTHYROXINE, SODIUM

TIGAN - SEE TRIMETHOBENZAMIDE

TIMOLOL (EENT)
TRADE NAME TIMOPTIC
CATEGORY 52:36 EENT - UNCLASSIFIED PREPARATIONS (BETA BLOCKING AGENT)
REGIMEN INSTILL ONE DROP OF 0.25% IN EACH EYE TWICE A DAY.
MAY INCREASE TO 0.5% TWICE A DAY.
DOSAGE FORM TIMOLOL MALEATE OPHTHALMIC DROPS 0.25%, 10 ML *TIMOPTIC*
TIMOLOL MALEATE OPHTHALMIC DROPS 0.50%, 10 ML *TIMOPTIC*
CAUTIONS PATIENTS ON OTHER BETA-BLOCKADE MEDICATION SHOULD BE EVALUATED FOR ADDITIVE EFFECTS.

TIMOPTIC - SEE TIMOLOL

TITRALAC - SEE CALCIUM CARBONATE

TOFRANIL - SEE IMIPRAMINE HYDROCHLORIDE

TOLAZAMIDE
TRADE NAME TOLINASE
CATEGORY 68:20 ANTI-DIABETIC AGENT (ORAL HYPOGLYCEMIC AGENT)
REGIMEN 100 MG TO 250 MG DAILY.
DOSAGE FORM TOLAZAMIDE TABLETS 250 MG

TOLBUTAMIDE USP
TRADE NAME ORINASE
CATEGORY 68:20 ANTI-DIABETIC AGENT (ORAL HYPOGLYCEMIC AGENT)
REGIMEN INITIALLY: 1-2 GRAMS DAILY. MAINTENANCE: 250 MG TO 2 GRAMS DAILY.
DOSAGE FORM TOLBUTAMIDE TABLETS USP 500 MG

-CONTINUED- TOLBUTAMIDE USP
CAUTIONS TOLBUTAMIDE MAY CAUSE PHOTOSENSITIZATION.
INTERACTION WITH ALCOHOL, CHRONIC: ENHANCED METABOLISM OF TOLBUTAMIDE MAY REDUCE HYPOGLYCEMIC EFFECT.
WITH BISHYDROXYCOUMARIN: INHIBITS METABOLISM TO INCREASE SERUM LEVELS AND MAY CAUSE HYPOGLYCEMIC REACTIONS.
WITH CHLORAMPHENICOL: CAN PROLONG HALF-LIFE TO CAUSE HYPOGLYCEMIC REACTION.
WITH CHLORTHALIDONE: ELEVATE BLOOD GLUCOSE LEVELS AND ANTAGONIZE HYPOGLYCEMIC EFFECT.
WITH ETHACRYNIC ACID: ELEVATE BLOOD GLUCOSE LEVELS AND ANTAGONIZE HYPOGLYCEMIC EFFECT.
WITH FUROSEMIDE: ELEVATE BLOOD GLUCOSE LEVELS AND ANTAGONIZE HYPOGLYCEMIC EFFECT.
WITH PHENYLBUTAZONE: INCREASED SERUM LEVELS MAY RESULT IN HYPOGLYCEMIA.
WITH SULFONAMIDES: POSSIBLE HYPOGLYCEMIA.
WITH THIAZIDE DIURETICS: ELEVATE BLOOD GLUCOSE LEVELS AND ANTAGONIZE HYPOGLYCEMIC EFFECT.

TOLMETIN
TRADE NAME TOLECTIN DS
CATEGORY 28:08.04 NONSTEROID ANTI-INFLAMMATORY AGENTS
REGIMEN INITIAL: 400 MG 3 TIMES DAILY ADJUSTED TO PATIENT'S RESPONSE AND TOLERANCE.
MAXIMUM DOSAGE RECOMMENDED NOT MORE THAN 2000 MG PER DAY.
ORAL, CHILDREN- 15-30 MG PER KG OF BODY WEIGHT PER DAY.
DOSAGE FORM TOLMETIN SODIUM CAPSULES 400 MG *TOLECTIN DS*
CAUTIONS MAY CAUSE EPIGASTRIC PAIN, NAUSEA, VOMITING, HEARTBURN, CONSTIPATION, DYSPEPSIA, GI BLEEDING, HEADACHE, DIZZINESS, AND DROWSINESS.

TOPSYN - SEE FLUOCINONIDE

TOTACILLIN - SEE AMPICILLIN

TOTAL PARENTERAL NUTRITION (TPN) - SEE AMINO ACIDS/PROTEIN HYDROLYSATE

TRAVAD - SEE SODIUM PHOSPHATE

TRAZODONE
TRADE NAME DESYREL
CATEGORY 28:16.04 ANTIDEPRESSANT
REGIMEN INITIAL DOSE: 150 MG PER DAY. THE DOSE MAY BE INCREASED BY 50 MG INCREMENTS EVERY 3 TO 4 DAYS.
TO OFFSET DROWSINESS MAY REQUIRE ADMINISTRATION OF A MAJORITY OF THE TOTAL DAILY DOSE AT BEDTIME OR A REDUCTION IN DOSAGE.
MAXIMUM OUTPATIENT DOSAGE: 400 MG PER DAY.
MAXIMUM INPATIENT AND SEVERELY DEPRESSED PATIENT: 600 MG PER DAY.
**** ALL DOSES GIVEN IN DIVIDED DOSES ****
DOSAGE FORM TRAZODONE HCL SCORED TABLET 50 MG *DESYREL*
CAUTIONS NOT RECOMMENDED FOR USE DURING PREGNANCY OR LACTATION.
WITH ALCOHOL: MAY ENHANCE THE RESPONSE.
WITH BARBITURATES: MAY ENHANCE THE RESPONSE.
WITH CNS DEPRESSANTS: MAY ENHANCE THE RESPONSE.
WITH MONAMINE OXIDASE INHIBITORS: POSSIBLE INTERACTIONS.
WITH GENERAL ANESTHETICS: USE WITH CAUTION.

-CONTINUED- TRAZODONE
TRAZODONE MAY CAUSE DROWSINESS.

TRETINOIN
TRADE NAME RETIN-A
RETINOIC ACID
CATEGORY 84:16 SKIN AND MUCOUS MEMBRANE CELL STIMULANTS AND PROLIFERANTS
DOSAGE FORM TRETINOIN CREAM 0.1% 20 GM
NOTE DO NOT USE NEAR EYES, MOUTH, OR MUCOUS MEMBRANES.

TRIAMCINOLONE (EMOLLIENT PASTE)
TRADE NAME KENALOG IN ORABASE
CATEGORY 36:00 DENTAL AGENTS
52:08 EENT ANTI-INFLAMMATORY AGENT
DOSAGE FORM TRIAMCINOLONE ACETONIDE EMOLLIENT DENTAL PASTE 0.1%, 5 GM *KENALOG IN ORABASE*

TRIAMCINOLONE (SYSTEMIC)
TRADE NAME ARISTOCORT
KENALOG
CATEGORY 68:04 ADRENALS
DOSAGE FORM TRIAMCINOLONE ACETONIDE INJECTION 40 MG PER ML, 5 ML *KENALOG-40*

TRIAMCINOLONE (WITH TOPICAL FUNGICIDE)
TRADE NAME MYCOLOG
CATEGORY 84:04.08 SKIN AND MUCOUS MEMBRANE FUNGICIDE
DOSAGE FORM TRIAMCINOLONE CREAM 0.1% (50%) AND NYSTATIN CREAM 100,000 UNITS (50%) *LUCOLOG*MYCOCORT*MYCOLOG FORMULA*MYCOLOG SUBSTITUE*

TRIAMCINOLONE (TOPICAL ANTI-INFLAMMATORY)
TRADE NAME ARISTOCORT
ARISTOCORT A
KENALOG
CATEGORY 84:06 SKIN AND MUCOUS MEMBRANE ANTI-INFLAMMATORY AGENT
DOSAGE FORM TRIAMCINOLONE ACETONIDE CREAM 0.1%, 15 GM *ARISTOCORT*KENALOG*
TRIAMCINOLONE ACETONIDE 0.1% IN HYDROPHILIC OINTMENT BASE, 75 GM *ARISTOCORT-A*

TRIAMTERENE
TRADE NAME DYAZIDE
DYRENIUM
CATEGORY 40:28 DIURETIC
REGIMEN ORAL, 1-2 CAPSULES DAILY
NOTE DO NOT EXCEED 300 MG DAILY
DOSAGE FORM TRIAMTERENE CAPSULES 100 MG *DYRENIUM*
TRIAMTERENE 50 MG AND HYDROCHLOROTHIAZIDE 25 MG IN EACH CAPSULE *DYAZIDE*
INTERACTION TRIAMTERENE WITH POTASSIUM SALTS: ADDITIVE TO PRODUCE HYPERKALEMIA.

TRIETHANOLAMINE (EENT)
TRADE NAME CERUMENEX
CATEGORY 52:36 EENT UNCLASSIFIED PREPARATIONS
REGIMEN FILL EAR CANAL, INSERT A COTTON 'PLUG' AND ALLOW TO REMAIN 15-30 MINUTES THEN FLUSH THE EAR CANAL COMPLETELY. WITH LUKEWARM WATER.

-CONTINUED- TRIETHANOLAMINE (EENT)
DOSAGE FORM TRIETHANOLAMINE POLYPEPTIDE OTIC SOLUTION 10%, 6 ML
CAUTIONS CAUSTIC TO EAR CANAL.

TRIFLUOPERAZINE HYDROCHLORIDE
TRADE NAME STELAZINE
CATEGORY 28:16.08 TRANQUILIZER
REGIMEN 1 MG TO 5 MG DAILY
DOSAGE FORM TRIFLUOPERAZINE HYDROCHLORIDE TABLETS 1 MG
TRIFLUOPERAZINE HYDROCHLORIDE TABLETS 2 MG
TRIFLUOPERAZINE HYDROCHLORIDE TABLETS 5 MG
CAUTIONS TRIFLUOPERAZINE MAY CAUSE DROWSINESS.
ALCOHOL SHOULD NOT BE CONSUMED WHILE TAKING TRIFLUOPERAZINE.

TRIHEXYPHENIDYL HYDROCHLORIDE USP
TRADE NAME ARTANE
CATEGORY 12:08 PARASYMPATHOLYTIC-CHOLINERGIC BLOCKING- AGENT
REGIMEN 1 MG 1ST DAY, 2 MG 2ND DAY, THEN INCREASE 2 MG EVERY 3-5 DAYS AS NEEDED OR UNTIL 6-10 MG PER DAY IS REACHED.
DOSAGE FORM TRIHEXYPHENIDYL HYDROCHLORIDE TABLETS 2 MG
CAUTIONS TRIHEXYPHENIDYL MAY CAUSE SEDATION.

TRILAFON - SEE PERPHENAZINE

TRIMEPRAZINE TARTRATE
TRADE NAME TEMARIL
CATEGORY 4:00 ANTIHISTAMINE
REGIMEN 2.5 MG FOUR TIMES DAILY
DOSAGE FORM TRIMEPRAZINE TARTRATE TABLETS 2.5 MG
CAUTIONS TRIMEPRAZINE MAY CAUSE DRYNESS OF THE MOUTH, CONSTIPATION OR DYSURIA.
INTERACTION WITH ANTICHOLINERGICS: ADDITIVE ANTICHOLINERGIC EFFECT.
WITH ANTIDEPRESSANT, TRICYCLIC: ADDITIVE ANTICHOLINERGIC EFFECT.
WITH CNS DEPRESSANTS: POTENTIATES SEDATION.
WITH PHENOTHIAZINES: ADDITIVE ANTICHOLINERGIC EFFECT.

TRIMETHOBENZAMIDE
TRADE NAME TIGAN
CATEGORY 56:20 ANTI-EMETICS
REGIMEN ORALLY, 100 TO 250 MG FOUR TIMES DAILY
PARENTERALLY, 200 MG IM
DOSAGE FORM TRIMETHOBENZAMIDE HYDROCHLORIDE SUPPOSITORIES 200 MG *TIGAN*
TRIMETHOBENZAMIDE HYDROCHLORIDE INJECTION 100 MG PER ML
2 ML NEEDLE-SYRINGE COMBINATION.
CAUTIONS TRIMETHOBENZAMIDE MAY CAUSE HYPOTENSION AFTER BEING GIVEN PARENTERALLY.
TRIMETHOBENZAMIDE MAY CAUSE DROWSINESS.

TRIMETHOPRIM/SULFAMETHOXAZOLE
TRADE NAME BACTRIM
BACTRIM DS
SEPTRA
SEPTRA DS
CATEGORY 8:20 SULFONAMIDE
REGIMEN TWO TABLETS EVERY 12 HOURS
ONE TABLET EVERY 12 HOURS (FOR DS FORMS).
SUSPENSION- CHECK WITH PHARMACY SERVICE OR SEE PDR.

-CONTINUED- TRIMETHOPRIM/SULFAMETHOXAZOLE
DOSAGE FORM TRIMETHOPRIM AND SULFAMETHOXAZOLE SUSPENSION (BACTRIM/SEPTRA)
EACH 5 ML CONTAINS:
TRIMETHOPRIM 40 MG
SULFAMETHOXAZOLE 200 MG
TRIMETHOPRIM AND SULFAMETHOXAZOLE TABLETS (BACTRIM DS, SEPTRA DS)
EACH SCORED TABLET CONTAINS:
TRIMETHOPRIM 160 MG
SULFAMETHOXAZOLE 800 MG
CAUTIONS NOT RECOMMENDED FOR USE DURING PREGNANCY OR WHILE LACTATING.
FOR INFANTS LESS THAN 2 MONTHS OLD - IS EXCRETED IN BREAST MILK.
SULFAMETHOXAZOLE MAY CAUSE PRIMAQUINE-SENSITIVE [illegible]
AND KERNICTERUS IN NEWBORNS.

TRIOXSALEN
TRADE NAME TRISORALEN
CATEGORY 44:50.06 PIGMENTING AGENTS
REGIMEN 10 MG TWO HOURS PRIOR TO EXPOSURE TO SUNLIGHT OR ULTRA-VIOLET IRRADIATION, NOT TO BE CONTINUED FOR MORE THAN 14 DAYS.
DOSAGE FORM TRIOXSALEN TABLETS 5 MG
NOTE USE IS AUTHORIZED FOR DEPARTMENT OF MEDICINE.

TRIPROLIDINE HYDROCHLORIDE
TRADE NAME ACTIFED
CATEGORY 4:00 ANTIHISTAMINE
REGIMEN ORAL: ONE TABLET OR 5 TO 10 ML TWO OR THREE TIMES A DAY.
ORAL: CHILDREN OVER 2 YEARS- 1.25 MG TWO OR THREE TIMES A DAY.
ORAL: CHILDREN UNDER 2 YEARS- 0.625 MG TWO OR THREE TIMES A DAY.
DOSAGE FORM TRIPROLIDINE AND PSEUDOEPHEDRINE TABLETS *ACTIFED/TRIPHED*
EACH TABLET CONTAINS:
TRIPROLIDINE HYDROCHLORIDE 2.5 MG
PSEUDOEPHEDRINE 60.0 MG
TRIPROLIDINE AND PSEUDOEPHEDRINE SYRUP, 120 ML
EACH 5 ML CONTAINS:
TRIPROLIDINE HYDROCHLORIDE 1.25 MG
PSEUDOEPHEDRINE 30.00 MG
CAUTIONS TRIPROLIDINE MAY CAUSE DRYNESS OF THE MOUTH, CONSTIPATION OR DYSURIA.
TRIPROLIDINE MAY CAUSE DROWSINESS.
NO ALCOHOL SHOULD BE CONSUMED WHILE TAKING TRIPROLIDINE.
INTERACTION WITH ANTICHOLINERGICS: ADDITIVE ANTICHOLINERGIC EFFECT.
WITH ANTIDEPRESSANTS, TRICYCLIC: ADDITIVE ANTICHOLINERGIC EFFECT.
WITH CNS DEPRESSANTS: POTENTIATES SEDATION.
WITH PHENOTHIAZINES: ADDITIVE ANTICHOLINERGIC EFFECT.

TRISORALEN - SEE TRIOXSALEN

TUCKS - SEE HAMAMELIS WATER

TURBO-INHALER - SEE CROMOLYN SODIUM

TWEEN - SEE POLYOXYETHYLENE SORBITAN MONOOLEATE

TYLENOL - SEE ACETAMINOPHEN

TYLENOL WITH CODEINE - SEE ACETAMINOPHEN

UNIPEN - SEE NAFCILLIN

UREA (TOPICAL)
TRADE NAME NUTRAPLUS
CATEGORY 84:16 SKIN AND MUCOUS MEMBRANE CELL STIMULANTS AND PROLIFERANTS
DOSAGE FORM UREA 10% IN EMOLLIENT CREAM BASE, 90 GM

URECHOLINE - SEE BETHANECHOL CHLORIDE

URINE CONTENTS DIAGNOSTIC AGENTS
TRADE NAME CLINITEST
TES-TAPE
CATEGORY 36:88 DIAGNOSTIC AGENT FOR URINE CONTENTS
DOSAGE FORM URINE GLUCOSE DIAGNOSTIC TAPE *TES-TAPE*
URINE SUGAR (GLUCOSE) DIAGNOSTIC TEST TABLETS *CLINITEST*

URISPAS - SEE FLAVOXATE

VALIUM - SEE DIAZEPAM

VALPROIC ACID
TRADE NAME DEPAKENE
CATEGORY 28:12 ANTICONVULSANT
REGIMEN INITIALLY: 15 MG PER KG PER DAY, INCREASING AT ONE WEEK INTERVALS
BY 5 MG TO 10 MG PER KG PER DAY UNTIL SEIZURES ARE CONTROLLED.
250 MG UP TO FIVE (5) TIMES A DAY.
MAXIMUM RECOMMENDED DOSAGE IS 60 MG PER KG PER DAY.
CHILDREN- 20-30 MG PER KG OF BODY WEIGHT DAILY.
NOT RECOMMENDED FOR USE DURING PREGNANCY AND NURSING.
DOSAGE FORM VALPROIC ACID CAPSULES 250 MG
VALPROIC ACID SYRUP 250 MG PER 5 ML
CAUTIONS CAUTION IS RECOMMENDED WHEN ADMINISTERED WITH DRUG AFFECTING
COAGULATION (I.E. ASPIRIN AND WARFARIN).
MAY PRODUCE TRANSIENT DIARRHEA, ABDOMINAL CRAMPS, CONSTIPATION.
CNS EFFECTS: SEDATION, ATAXIA, HEADACHE, NYSTAGMUS AND TREMOR.
VALPROIC ACID INCREASES SERUM PHENOBARBITAL LEVELS.
MAY GIVE FALSE POSITIVE URINE KETONE TEST (EXCRETED AS A KETONE).
CHANGES FREE (UNBOUND) PHENYTOIN SERUM CONCENTRATION.
ALTERS BLEEDING TIME AND INCREASES S G O T.

VANCENASE - SEE BECLOMETHASONE

VANCERIL - SEE BECLOMETHASONE

VASOCON-A - SEE NAPHAZOLINE HYDROCHLORIDE

VASODILAN - SEE ISOXSUPRINE HYDROCHLORIDE

VASOPRESSIN
TRADE NAME PITRESSIN
PITUITRIN (S)
CATEGORY 68:20 PITUITARY HORMONE
DOSAGE FORM VASOPRESSIN INJECTION USP 10 UNITS PER ML, 1 ML AMPULE

V-CILLIN K - SEE PENICILLIN V

VEETIDS - SEE PENICILLIN V

VELOSEF - SEE CEPHRADINE

VERAPAMIL
TRADE NAME CALAN
ISOPTIN
IPROVERATRIL
CATEGORY 24:12 VASODILATING AGENTS
REGIMEN INITIAL, ORAL: 80 MG THREE TO FOUR TIMES DAILY.
MAXIMUM OF 480 MG DAILY.
INTRAVENEOUS USE ONLY - SEE LITERATURE FOR SPECIFIC INFORMATION.
ADULT, INITIAL: 5 MG TO 10 MG I.V. BOLUS OVER 2 MINUTES.
ADULT: IF RESPONSE IS NOT ADEQUATE, REPEAT 10 MG DOSE IN 30 MINUTES.
PEDIATRIC, INITIAL: 0.1 TO 0.2 MG PER KG AS AN IV BOLUS OVER 2 MINUTES.
PEDIATRIC: REPEAT DOSE AFTER 30 MINUTES IF REQUIRED.
OLDER PATIENTS: ADMINISTER OVER THREE MINUTES.
NOTE: INDICATED FOR TREATMENT OF SUPRAVENTRICULAR TACHYARRHYTHMIAS.
DOSAGE FORM VERAPAMIL ORAL TABLETS 80 MG *CALAN*ISOPTIN*
VERAPAMIL INJECTION 2.5 MG PER ML, 2 ML AMPUL *CALAN*ISOPTIN*
NOTE USE IS AUTHORIZED FOR INTERNAL MEDICINE SERVICE.
USE IS AUTHORIZED FOR CARDIOLOGY SERVICE.
USE IS AUTHORIZED FOR THE EMERGENCY ROOM.
CAUTIONS USE WITH CAUTION WITH RENAL AND HEPATIC IMPAIRMENT.
BETA-BLOCKERS SHOULD BE ADDED CAUTIOUSLY.
ANTIHYPERTENSIVE AGENTS INCREASE EFFECT.
SHOULD NOT BE USED WITH QUINIDINE.
SHOULD NOT BE USED WITH DISOPYRAMIDE
INTERACTION WITH DIGOXIN: INCREASES SERUM DIGOXIN LEVELS BY 50% TO 70%.

VERMOX - SEE MEBENDAZOLE

VIDARABINE (EENT)
TRADE NAME VIRA-A
CATEGORY 52:04.06 EENT ANTIVIRALS
REGIMEN APPLY 5 TIMES DAILY AT 3 HOUR INTERVALS.
DOSAGE FORM VIDARABINE OPHTHALMIC OINTMENT 3%, 3.5 GM *VIRA-A*

VINCRISTINE
TRADE NAME ONCOVIN
CATEGORY 10:00 ANTINEOPLASTIC AGENT
REGIMEN NOTE: USED ONLY IN ACUTE LEUKEMIA IN CHILDREN.
DOSAGE VARIES
DOSAGE FORM VINCRISTINE SULFATE INJECTION 1 MG
NOTE ITEM MUST BE REFRIGERATED.
USE IS AUTHORIZED FOR INTERNAL MEDICINE SERVICE.
NOT CARRIED IN STOCK . . . ORDERED AS NEEDED.

VIRA-A - SEE VIDARABINE

VIRILON - SEE METHYLTESTOSTERONE

VISCOUS XYLOCAINE - SEE LIDOCAINE USP

VISINE - SEE TETRAHYROZOLINE HYDROCHLORIDE

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*CONTINUED*      VITAMINS, MULTIPLE
                     ASCORBIC ACID              500 MG

VITAMINS, MULTIPLE WITH FLUORIDE
     TRADE NAME  POLY-VI-FLOR
     CATEGORY    88.28 MULTIVITAMIN PREPARATIONS
     DOSAGE FORM MULTIPLE VITAMINS WITH FLUORIDE DROPS *POLY-VI-FLOR*
                   EACH 1.0 ML CONTAINS:
                     VITAMIN A              1500 I.U.
                     VITAMIN B1              0.5 MG
                     VITAMIN B2              0.6 MG
                     VITAMIN B6              0.4 MG
                     VITAMIN B12             2.0 MCG
                     NIACIN                  8.0 MG
                     VITAMIN C              35.0 MG
                     VITAMIN D             400.0 I.U.
                     VITAMIN E               5.0 I.U.
                     FLUORIDE                0.25 MG
                     FLUORIDE                0.5 MG

VIVONEX - SEE STANDARD DIET

VIVONEX - SEE DIETARY FOOD FORMULA AND FOOD SUPPLEMENTS

WARFARIN SODIUM  USP
     TRADE NAME  COUMADIN
     CATEGORY    20112.04 ANTICOAGULANT
     REGIMEN     MAINTENANCE DOSE: ORAL AS INDICATED FOR SPECIFIC PATIENT.
     DOSAGE FORM SODIUM WARFARIN TABLETS USP 5 MG
     INTERACTION WITH ALCOHOL, ACUTE: REDUCE METABOLISM TO INCREASE HEMORRHAGE RISK.
                 WITH ALCOHOL, CHRONIC: ENHANCED METABOLISM TO REDUCE WARFARIN EFFECT.
                 WITH ALLOPURINOL: MICROSOMAL ENZYMES INHIBITED (MONITOR WARFARIN LEVEL)
                 WITH ANABOLIC STEROIDS: INCREASED RISK OF HEMORRHAGE POSSIBLE.
                 WITH BARBITURATES: INCREASE SYNTHESIS OF MICROSOMAL ENZYMES TO
                      METABOLIZE WARFARIN AND DECREASE WARFARIN RESPONSE.
                 WITH CARBAMAZEPINE: INCREASE SYNTHESIS OF MICROSOMAL ENZYMES TO
                      METABOLIZE WARFARIN AND DECREASE WARFARIN RESPONSE.
                 WITH CHLORAL HYDRATE: DISPLACES WARFARIN FROM THE PROTEIN BINDING SITE
                      TO INCREASE PROTHROMBIN TIME AND INCREASE RISK OF HEMORRHAGE.
                 WITH CHLORAMPHENICOL: INCREASED PROTHROMBIN TIME AND INCREASE RISK OF
                      HEMORRHAGE.
                 WITH CHOLESTYRAMINE: BINDS WARFARIN IN GI TRACT TO IMPAIR ABSORPTION
                      AND DECREASE WARFARIN RESPONSE.
                 WITH CLOFIBRATE: DISPLACES WARFARIN FROM THE PROTEIN BINDING SITE TO
                      INCREASE PROTHROMBIN TIME AND INCREASE RISK OF HEMORRHAGE.
                 WITH CONTRACEPTIVES, ORAL: INCREASE SOME CLOTTING FACTOR ACTIVITY TO
                      DECREASE WARFARIN EFFECT.
                 WITH DIAZOXIDE: DISPLACES WARFARIN FROM THE PROTEIN BINDING SITE TO
                      INCREASE PROTHRUMPIN TIME AND INCREASE RISK OF HEMORRHAGE.
                 WITH DISULFIRAM: INHIBITS MICROSOMAL ENZYMES TO INCREASE WARFARIN
                      EFFECT.
                 WITH DEXTROTHYROXINE: INCREASED RESPONSE TO WARFARIN.
                 WITH ETHACRYNIC ACID: DISPLACES WARFARIN FROM THE PROTEIN BINDING SITE
                      TO INCREASE PROTHRUMPIN TIME AND INCREASE RISK OF HEMORRHAGE.
                 WITH GLUCAGON: ENHANCES WARFARIN EFFECT.
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HASP-II###HASP-II.....END JOB 905.....6.56.39 PM 5 DET 84....RDRM 0 ....R19PID ....FORMULARY.....HASP-II###HASP-II
HASP-II###HASP-II.....END JOB 905.....6.56.39 PM 5 DET 84....RDRM 0 ....R18PID ....FORMULARY.....HASP-II###HASP-II
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HASP-II###HASP-II.....END JOB 905.....6.56.39 PM 5 DET 84....RDRM 0 ....R10PID ....FORMULARY.....HASP-II###HASP-II

NEW DRUG ADDITIONS IN THIS EDITION

Acetaminophen supp 650 mg.
Accutane 40 mg capsule
Albuterol inh (Proventil)
  200 inhalations/unit
Caffeine and sodium benzoate injection
Captopril 50 mg tablet (scored)
Chigg away 4 oz bottle
Cetacaine spray
Cleocin T solution 60 ml
  (only after unsuccessful trial
  with Staticin)
Corgard 80 mg tablet (scored)
Cortisporin otic suspension 10 ml
Cortisporin eye drops 5 ml
Desyrel 50 mg tablet
Dextrostix 25 strips per bottle
DHE 45 replaced ergotamine inj
Diltiazem 60 mg tablets (Cardizem)
Feldene 20 mg capsule
Gentian violet 1% 30 ml bottles (replaced 2%)
Gemfibrozil 300 mg cap (Lopid)
Hydrocortisone 20 mg tablets
Immune globulin (Rhogam) Note: Lab item
Loniten 10 mg (minoxidil) tablet
Minocin 100 mg capsule (only after unsuccessful
  trial with TCN and Emycin)
Nizoral 200 mg tablet scored
Norpace 150 mg capsule replaced
  100 mg (disopyramide)
Phytonadione inj 1 mg (Aquamephyton)
Procan SR 500 mg tablet (unscored)
Ritalin SR 20 mg (coated tablet unscored)
Serax 15 mg capsule

DRUG DELETIONS

Bace
Benadryl 10 mg/ml
  10 ml vial
Brevicon (item will be
  maintained in stock
  until present supply
  expires 7/85)
Cordran tape
Corticotropin gel
  (acthar) inj
Colymycin otic drops
Chemstrip bg
Chigger lotion
  (replaced by Chigg-away)
Cortisporin otic solution
Decadron turbinaire
Dehydrocholate inj
Epinephrine inhalation soln
  (micronefrin)
Ergotamine inj
Isuprel 1:200
Iso-medihaler
Marax DF syrup
Miconazole cream (monistat derm)
  replaced by lotrimin cream
Norpace 100 mg capsules
Quinidex tablets
Quibron capsules/syrup
Staphcillin (methicillin) inj
Talwin inj
Theophylline 250 mg SR
Verapamil 120 mg tablets

NEW DRUG ADDITIONS IN THIS EDITION (cont'd)

Shohls solution (Bicitra)
Theodur 300 mg replaced Theophylline SR 250 mg
Valproic acid syrup (Depakene)
Verapamil 80 mg (Calan, Isoptin) replaced 120 mg
Vivonex standard
Zarontin syrup (ethosuximide)

DRUG DELETIONS

(3) Prescriptions signed by physician assistants and nurse practitioners must bear the stamp "May be filled at this medical facility only."

b. Civilian Prescriptions: The pharmacy will fill prescriptions written by fully qualified civilian physicians and dentists for eligible patients to the extent that the availability of space, facilities, and capabilities of the professional staff allow.

(1) The prescription must contain the business address of the prescriber, be written in ink, indelible pencil, or typed.

(2) All prescriptions must be written for drugs routinely stocked in the pharmacy and for reasonable quantities as determined by the Pharmacy and Therapeutics Committee.

c. Controlled Drugs: Prescriptions for controlled substances must be written in accordance with federal and state laws as well as Air Force regulations.

(1) Prescriptions must contain the name, address, and telephone number of the patient, and the Drug Enforcement Agency (DEA) number of the prescriber. Military physicians may use their SSAN in lieu of DEA number but must have the name stamped or printed on the prescription in addition to the manual signature.

(2) Prescriptions for Schedule III, IV, and V drugs will not be refilled, except seizure or approved chronic problem medications. These drugs may only be refilled a maximum of five times within six months if so indicated by the prescriber.

(3) Schedule II prescriptions will not be filled after three (3) days and Schedule III, IV, and V prescriptions will not be filled after 30 days from the date written.

(4) The quantity will be written both as a numeral and spelled out as a word on prescriptions for controlled drugs.

(5) Prescriptions for schedule drugs dispensed by the emergency room will accompany a DD Form 1150 to the pharmacy when requesting replacement stock for schedule drugs in the emergency room.

d. Ward and Clinic Stock Drugs: The pharmacy will provide wards and clinics with those drugs on the authorized list when presented with DD Form 1150 or other suitable requisition properly prepared and signed by the charge nurse or her delegated representative (other nurse in charge, if charge nurse is absent).

(1) Schedule II drugs will not be requisitioned with any other drugs. Schedule III, IV, and V drugs must be requisitioned as a group and not with any other drugs. All other drugs authorized may be requisitioned together.

(2) No drugs will be issued on AF Form 781, for stock on wards or clinics, except controlled drugs prescribed which are not approved for ward stock. Prescriptions will be for specific patients.

(3) Only those drugs which have been approved by the Pharmacy and Therapeutics Committee may be routinely stocked by the clinics, ward, and emergency room. All authorized drug lists will be reviewed annually by the Pharmacy and Therapeutics Committee. All changes to authorized drug lists will be submitted to the Pharmacy and Therapeutics Committee for approval.

e. Unit Dose Medications: Ward unit dose carts will be picked up and filled at 1530 hours, Monday through Friday, and at 1400 on Saturday and Sunday.

(1) A twenty-four hour supply of medication for each patient will be placed on the cart.

(2) Medications for patients admitted after the unit dose cart is delivered will be obtained from the Medication Control Module (MCM).

(a) Hospital Form 0-14, Pharmacy Services Medication Control Module Request, must be inserted in the appropriate slot of the MCM. These forms will be collected by the pharmacy at 0730 hours each day. To insure proper stocking and credit all items removed from the MCM must be recorded on Hospital Form 0-14 with the exception of controlled drugs.

(b) The medication card for the medication requested must be inserted along with the nurse's MCM key to remove any medication from the MCM.

(3) Schedule II drugs will be ordered on Monday, Wednesday, and Friday and placed under double lock and key in the cart. Schedule III, IV, and V drugs will be placed in drawer 1 of the MCM.

f. Intravenous Admixtures. Intravenous admixtures will be prepared by the pharmacy between the hours of 0730 and 2000 seven days a week and will be ordered on Hospital Form 0-13, Pharmacy Service Intravenous Additive Order, at 0730 hours daily. The pharmacy will be notified promptly of discontinued admixtures. Intravenous admixtures are routinely prepared daily at 1300 hours.

3. Local Purchase of Pharmaceuticals:

a. The pharmacy will not local purchase drugs to fill civilian prescriptions unless the patient was referred to a civilian physician by a military physician and the military physician retains responsibility for the patient's care. Budget limitations may restrict procurement of drugs not in formulary at any time.

b. The pharmacy will local purchase any drug needed for essential treatment of patients by military practitioners with the approval of the Pharmacy and Therapeutics Committee (P&T) and the Director, Base Medical services. In emergencies such drugs will be purchased as soon as possible with the approval of the Hospital Administrator or the DBMS. Such purchases will be reviewed by the P&T at a later date.

4. Forms prescribed: Hospital Form 0-13 and Hospital Form 0-14. Dispose of IAW AFM 12-50, Table 168-7, Rule 4.